

An outbreak of Typhoid Fever;  
Its clinical features and treatment.

being Thesis for the degree  
of M.D.

by

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Gleland

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Outbreaks of Typhoid Fever are very common and frequent among the scattered Mining villages in the North East and West of Lanarkshire.

So much is this the case that it is very rare for the villages contained within and bounded on the south by Wishaw, on the north by Airdrie, on the west by Hamilton, & on the east by West Calder to be altogether free from cases of Typhoid Fever, while epidemics of genuine Typhus are not infrequent.

One great cause for

for the prevalence of so much fever in these districts is the fact of the population being so migratory in character: whole families constantly moving about in search of work from one mining village to another.

Another is the utter ignorance of the great bulk of the inhabitants as to the simplest of the laws of health, and a third is the dirty and filthy habits of the common working people.

The outbreak of Typhoid Fever which I wish to narrate occurred about the end of the year 1888.

In all about 30 persons, children and adults,

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were more or less affected, and recovered, I am glad to say, without any serious result following.

It was first observed in a family who came from the neighbouring village of harkhall to reside in the Cleland district.

When first brought under my notice two of the children, aged respectively 6 and 10 years were suffering from pronounced symptoms of Pneumonia

These two cases passed through all the phases of ordinary Pneumonia and recovered, although convalescence was long delayed.

Before these two children were completely

restored to health, other two members of the same family, aged 8 and 10 years, took the disease; both suffered from pronounced symptoms of Pneumonia; but under suitable treatment recovered completely, and again, in both cases, convalescence was very much retarded.

Two doors from the house where these cases occurred and before they were thoroughly better, a young man, John Bomar, aet 16, took to bed suffering from nausea, pain in the back and loins, furred tongue, fever, thirst, anorexia and diarrhoea.

A week after the disease showed itself this case

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developed into one of typical typhoid fever. The temperature was not very high but the bowels were pretty loose, there being as many as 10 and 12 pea soup stools in 24 hours.

After he had been ill 10 days a few spots began to appear on the abdomen; they were very characteristic, did not come out in successive crops, and disappeared about the beginning of the third week of illness.

As will be noticed from the accompanying temperature chart this young man's temperature never ranged very high, alternating between  $101^{\circ}$  and  $104^{\circ}$  F., until convalescence became established; nevertheless he was ill for a very



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long time being away from his work for nearly three months.

Previous to John Bommar's recovery two children of the name of Wilson, aged 6 and 15, began to be affected with symptoms somewhat similar to those in Bommar's case but very much modified. They suffered from slight furred tongue, pain in the head, inability to take food, pain in the bowels and constipation.

Their temperature never went beyond  $101^{\circ}$ ; oftener it ranged between  $99^{\circ}$  to  $100.6^{\circ}$ , and no spots ever appeared on the abdomen. These children, although obviously ill, and one of them unable to follow his usual occupation of driving a pit pony, notwithstanding

were able to go about: hardly ever required to go to bed during the day, and after suffering thus for about three weeks or a month began to recover slowly.

These two cases did not require very much treatment. An occasional dose of Castor Oil or Compound Licorice Powder to overcome the constipating nature of the complaint, bland food, and a tonic of Magnesia Sulph: with the Mineral Acids and Strychnia during the period of convalescence being all that was required.

In the beginning of 1889 about 20 persons - children and adults - were seized with symptoms of Typhoid Fever, some were very ill and presented typical cases of Typhoid; others were

not so ill and did not appear to suffer from anything very particular

I have selected eleven cases for the purpose of showing that during an epidemic of typhoid fever examples occur that are very like, and may be mistaken for genuine typhoid, but are not at all typical

Whenever it was discovered that we were dealing with a genuine epidemic of typhoid fever, the local Authority of the Parish of Shotts at once ordered all those affected to be removed to the Fever Hospital at Wishaw, and through the kindness of Dr Bowan of Wishaw I am enabled to complete the clinical history of all those that were sent there.

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Before giving in detail the prominent symptoms of those sent to the Fever Hospital I would like to draw attention to the difficulties that exist in arriving at a correct diagnosis of Typhoid Fever in its early stages.

Regarding this point Dr Murchison in his work on Fevers 3<sup>d</sup> edi - 1884 - page 596 says

"During the first week of  
"the disease it may be impossible  
"to form a positive diagnosis;  
"but even then Enteric Fever may  
"be suspected if there be pyrexia.  
"with nocturnal exacerbations each  
"night becoming more severe, and  
"especially if this be attended by  
"diarrhoea, enlarged spleen, or  
"epistaxis. When, after febrile  
"symptoms of about a week's

" duration, lenticular rose spots  
 " appear in successive crops as described  
 " at page 510, the diagnosis of Enteric  
 " Fever is certain, whatever be the  
 " other symptoms.

Two or three characteristic  
 " spots will be sufficient.

Even if there be no spots.  
 " or if those present be not characteristic  
 " the diagnosis of Enteric Fever may  
 " be positive in a case where pyrexia  
 " of a remittent type has lasted  
 " upwards of a week and is  
 " associated with diarrhoea, ochrey  
 " stools, tympanitis, and abdominal  
 " pain, enlarged spleen or epistaxis.

If both the eruption and  
 " abdominal symptoms be absent.  
 " the diagnosis of enteric fever can  
 " only be arrived at by a process  
 " of exclusion, after carefully

" comparing the symptoms with those  
 " of the other diseases with which enteric  
 " fever is most apt to be confounded;  
 " but practically this rule will be  
 " found to hold good: - A fever  
 " which in this country (aquish districts  
 " excepted) persists beyond seven  
 " days, and is unattended by cutaneous  
 " eruption, or by signs of local disease  
 " in the head, chest, or elsewhere, is  
 " in all probability enteric fever,  
 " even though there be no symptoms  
 " of intestinal lesion.

Dr Bairdner, Clinical Medicine  
 1862 - page 111 says

" Nothing, then, can well be more  
 " variable or less characteristic than the  
 " general symptoms of this fever. (Enteric)  
 " I have seen it resolve itself  
 " in ten days, with the symptoms of

" a febricula only, or of a mild  
 " remittent fever,

I have seen it on the  
 " other hand, last nearly as many  
 " weeks, and pass imperceptibly  
 " into organic disease.

It mimics in turn  
 " not only all other fevers, but  
 " many other general or local diseases.  
 " - phthisis, pneumonia, meningitis.  
 " perhaps more frequently than most  
 " others

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" But there was diarrhoea, more or  
 " less in all the four cases, This I  
 " need hardly say, is the particular  
 " symptom from which the name "Enteric"  
 " is applied to this fever is derived.

Diarrhoea, without known  
 " cause, with light coloured, ochrey,  
 " or blood tinged stools, and with

" a tympanitic state of the abdomen.  
" gurgling on movement, or tenderness  
" on pressure in the right iliac fossa,  
" are symptoms as nearly characteristic  
" of this fever as any that can  
" be named, And yet I would  
" not have you trust to these symptoms  
" too much, for some of them are  
" absent in the majority of cases,  
" and even diarrhoea may be very  
" transitory, as it was in two, at  
" least, of our four cases (not  
" lasting beyond a few days, or  
" even hours); or it may appear  
" to have been determined by a  
" purgative. Further, there may  
" be no diarrhoea; and even in fatal  
" cases, with great ulceration of the  
" intestines, diarrhoea may not  
" appear till a very late period.



These graphic pictures describe exactly the condition of most of the patients affected during the outbreak - we find the greatest differences existing both as regards temperature, Pulse, Spots and the condition of the bowels.

## Temperature

It will be noticed that as regards the temperature they were all very much alike, of those who were not sufficiently ill to admit of their being sent to the Hospital I failed to find a temperature higher than  $102^{\circ}$ ; oftener it oscillated between  $99^{\circ}$  and  $101^{\circ}$ . Of those sent to the Hospital it will be observed on looking at the annexed temperature charts that they were all very

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Much alike - two thirds of those under exact observation did not develop, at temperature beyond  $104^{\circ} F$ , only in 3 cases did the temperature reach  $105^{\circ}$  to  $105.6^{\circ}$

The characteristic gradual rise and elevation of the temperature in the early stages of this disease is well seen on reference to the charts, as also the lysis, or the gradual diminution of the fever, spread over several days when nearing its termination and going on to the stage of convalescence.

## Pulse -

In all the cases the pulse showed more signs of variation than the temperature -

It ranged from normal up to 140 per minute, but generally it may be said that any complications causing rise of temperature were almost invariably accompanied by a concurrent increase in the pulse rate.

In two of the cases the pulse developed the dicrotic or double beat condition so often observed in the convalescence from Typhus, Typhoid and other fevers.

In only one of the cases did the pulse rate reach 140 per minute, and in two

130 per minute, the average rate being between 96 and 120 per minute.

## Spots or Rash

Murchison - 3 ed. page 512  
 says - "regarding spots, the eruption  
 " is not invariably present. of  
 " 5,988 cases admitted into the  
 " London Fever Hospital during  
 " 23 years, it was noted in 4,606,  
 " or in 76.92 per cent, in some  
 " of the remaining 1,382 cases  
 " the fact of the spots not being  
 " observed was perhaps due to  
 " their not having been looked  
 " for with sufficient care.

- - - - - They are more  
 " frequently absent in patients  
 " over 30 and under 10 years of

"age, than in patients between  
"10 and 30.

66 per cent of all the cases noted - those sent to the Hospital and those remaining at Home, had the peculiar rash or spots of typhoid fever.

They were little round rose coloured spots like flea bites, slightly elevated and disappearing on pressure

Some had only a few and these not appearing in several crops as usual.

Robert Cairns only developed two single spots during the whole course of the disease. Others had a great many and in successive crops. 33 per cent of all those affected had

None of the spots so characteristic of this fever at any time during the whole course of the disease on any part of their body.

## Diarrhoea

The condition of the bowels in an ordinary attack of typhoid fever is very characteristic. Typical typhoid stools are of thin consistence and pale yellowish colour, resembling pea soup, of an offensive odour, and of alkaline reaction.

About  $\frac{1}{3}^d$  of those affected in the present outbreak exhibited the typical typhoid stools, of the remaining  $\frac{2}{3}^ds$  no two patients were exactly

alike, - We find a father and son ill with symptoms very similar to each other, the only difference being that the son had the typical typhoid stools and the father constipation, hamont and Jeanie

Watson had very severe diarrhoea, so much so, that the first named passed a considerable quantity of blood in the stools while in the Hospital, while their sister Mary, suffering from the same disease, never had diarrhoea at any time in the course of her illness but constipation so troublesome that she never had a movement of the bowels without having previously taken castor oil or some other purgative,

Two brothers and a sister of the name of Cairns also exhibited differences in the condition of the bowels, Jeanie Cairns had constipated bowels up till the 12<sup>th</sup> day of the fever, and only after the spots appeared on the 13<sup>th</sup> day, did the bowels become loose and similar to the ordinary typhoid stools, Alexander Cairns had the ordinary pea soup stools from the first day of the attack, and these not in any way connected with the rash which appeared the first week of the disease. John Cairns had constipation at the beginning of the complaint and developed yellow coloured stools after the administration of castor oil.



John and Katie Borman also presented differences in the condition of the bowels, John had typhoid stools from the very commencement of the attack while Katie, his sister, had to get an occasional purgative to keep the bowels regular.

## Complications

Only in one case was there any haemorrhage from the bowel and that was easily remedied by suitable treatment.

In three cases there was delirium, not very pronounced however, and it only occurred about the acme of the fever.

In two separate cases Bronchitis supervened during the course of the fever but did not lead to anything serious.

In one girl - Katie Bomer - measles developed during the progress of the fever, but the only remarkable feature in the case was the fact that there was no rise of temperature concurrent with the development of the rash characteristic of that disease.

The poison of measles was evidently held in check by the poison of Typhoid Fever so far as the temperature was concerned, and only after the rash had disappeared and desquamation ensued did the temperature rise to  $103.6^{\circ}$ .

Only in one family, that first of all affected, did symptoms of Pneumonia appear; and I am not sure that after all ~~but~~ we were dealing with cases of Typhoid Fever complicated with Pneumonia, the fever being so slight that the parents never noticed anything wrong, only calling in medical aid when the inflammation of the lungs developed itself. It is only on this supposition that the cause

of this outbreak can be traced to its source. This family (two of them at first and two afterwards) took ill immediately on coming to Cleland. They came from the village of Parkhall where Typhoid Fever was raging, and they acted as a source of infection to this country side.

If these four children had been sent to the Hospital either during their illness or during convalescence, I am certain far fewer people would ultimately have been affected with Fever.

My strong belief is that in an epidemic of any of the infectious fevers, in country districts like this, there is nothing can stamp it out but sending those affected to an Hospital where nothing but fever cases are

admitted: and I am glad to think that, under the New Infectious Diseases Act of 1889, power is given to the sanitary authorities acting under the advice of their Medical Officer to remove persons suffering from fever to the Hospital whether that Hospital is in the same parish or not,

# Treatment.

Very little treatment is required in uncomplicated cases of typhoid fever. An uncomplicated case of typhoid fever tends to get better without any treatment.

In all those cases treated at home and in the Hospital a rise of temperature indicated the administration of some antipyretic.

Antifebrine in 5 grain doses every four hours or oftener is very useful for that purpose. It lowers the temperature, relieves the headache and backache, cools the skin, and moistens the tongue. Antipyrine is not so useful in the class of cases we are considering having a tendency to depression which it is not judicious to continue.

A mixture of antifebrine and Quinine acts very nicely in typhoid, lowering the temperature and making the patient comfortable.

Notice from the Hospital Journal that Dr Cowan besides giving Antifebrine administered Oil of Eucalyptus for Bronchitis when it occurred as a complication and at the same time gave it with a view to its antiseptic action on the bowels.

Two of those sent to the Hospital required Fr Catechu and one compound Kino Powder to control the action of the bowels.

For the diarrhoea of Typhoid Fever I have been in the habit for some years past of prescribing Chlorate of Potass, 5 grain doses three times a day for adults

and proportionally less doses for children, I cannot explain how it acts, but it certainly has a very great effect in the diarrhoea of Typhoid Fever as well as in any other kind of diarrhoea.

It lessens the frequency of the motions, stools are not so watery and it subdues to a great extent the offensive odour and tends to the formation of the normal stool. It acts even much better in those varieties of diarrhoea known as "nervous" and "chronic". In fact in the last named variety I have seen Chlorate of Potash succeed when other and stronger remedies failed.

The following notes of three cases will illustrate its value in chronic diarrhoea.



Miss H- act 40, suffered from diarrhoea for several years.

Living in Edinburgh she was able to command and received the best Medical Skill in that City. As she was on a visit to some friends in this district I was asked to see her.

She was very weak, pale and emaciated and hardly able to go out of doors. Said her life was a burden to her and she was beginning to look forward to a fatal issue. On learning that she had taken every known medicine and had altered her diet in every conceivable way, I felt that anything I might give her would not have much effect, and more by way of giving her something that she had not had before

than for any good result it might bring about I ordered her bblorate of Potash in 5 grain doses three times a day. To my astonishment and pleasure two months afterwards she wrote thanking me for having saved her life, at the same time saying that she felt better now than she had done for years, that the diarrhoea did not trouble her, and that she could go anywhere and was able to eat and digest any kind of food with no fear of any ill effects following.

On enquiry now (April 1892) I find that she still continues in good health and being naturally of an active turn of mind she can now do a large amount of philanthropic work, which her illness of four years ago completely prevented.

Mrs B--- act 52. the mother of 6 children, thin and spare and of a very nervous temperament, has been troubled with diarrhoea since she was 46 although otherwise in good health. Anything that disturbs her brings on a bowel complaint, a fright or sudden start causes diarrhoea of several days duration, she took a great deal of medicine for the condition before coming to bland but since coming has taken Chlorate of Potash and finds that it controls the diarrhoea everytime she takes it.

She is very apt to stop the medicine whenever she finds herself better but says that she can always regulate the action of the bowel

by resuming the medicine.

Mrs F. . . . . act 48. suffered for two years from pernicious anaemia from which she ultimately died - During the course of the disease she was very much troubled with the condition of the bowels.

Diarrhoea was a prominent symptom at the commencement of the attack and unlike ordinary diarrhoea was unamenable to treatment.

Everything in the B.P. was tried - Iron, Opium, Cassia, Silver, Catechu, Kino, Fr Boto, with alteration of diet and external applications, but all to no purpose. About a year before she died an eruption

appeared upon the tongue and fauces, Chlorate of Potash was given in 5 grain doses three times a day as a wash for the mouth and throat to be swallowed.

No sooner was the salt of Potash given for that purpose than the bowels, which had been very troublesome up to that time, began to improve, and as the patient herself informed me she lived in a different-world now, being able to regulate and control their action and at the same time felt very much stronger on account of the stoppage of such a serious drain on the system.

These cases (I could adduce a great number more) taken from those occurring in every day practice, indicate the value of Chlorate of Potash in the various forms of chronic diarrhoea. I am not so sure of its value in acute diarrhoea, as for instance, in cases of typhoid fever accompanied with inflammation and ulceration of the solitary and agminated glands (Peyer's Patches) in the intestine. I have not had experience of its action in the acute stage of typhoid, but after the acute symptoms have passed away it is of the greatest utility.

And in cases of nervous ~~Chronic~~ diarrhoea occurring in women about the menopause it may be said to be almost a specific.

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# Clinical Notes of 11 cases of Typhoid Fever

Robert Cairns - aet  $8\frac{1}{2}$  years

Feb 23 - Has not been feeling well for a week - lies very prostrate, cheeks flushed, skin dry, tongue glazed and dry at edges and tip, thirst moderate, appetite bad, expression intelligent but fretful, abdomen flaccid and tender, gurgling in right iliac fossa, no enlargement of Spleen  
Temp  $100.2$ , Pulse 90, bowels loose.

" 24 Much in the same condition, whitish fur developing on tongue. two motions since yesterday, no spots. motions loose and yellow in colour, Temp  $101^{\circ}$ , Pulse 96.



Feb 26 - Rather worse ~~like~~ to-day, bowels  
6 motions since last entry and  
typhoid in character. No spots  
Temp 102, Pulse 100, Respiration 20,  
ordered Antifebrine 4 grains every six  
hours

" 28. Feels better to-day, not so distressed.  
Temp 101.6, Motions 4 since 26<sup>th</sup>  
Pulse 96, Resp 18

Mar 1<sup>st</sup> - Not so well to-day, sores on teeth  
and lips, 3 loose motions since  
yesterday. Temp 102°, Pulse 110, Resp 22,

" 2 - Sent to Fever Hospital at Wishaw.

" 3 Extracted from Journal -  
Patient considerably emaciated  
flaky brown fur on centre of tongue.  
No spots. 3 motions since admission.  
Slept very little but not delirious,  
slight cough and an occasional  
râle in chest, ordered 3 Minims of  
ol Eucalyptus in 3ps of olive and

3<sup>1</sup>/<sub>2</sub> whiskey every four hours

Temp 99°, Pulse 90, Resp 16.

Mar 5, Tongue very dry & glazed, borders  
of lips & teeth to some extent,  
abdomen rather distended.

Temp 99.2, Pulse 90, Resp 20, Bowels 0.

" 8<sup>th</sup> - looks better today, ordered cough  
mixture for cough

Temp 101.4, Pulse 126, Resp 20, Bowels 3.

" 9<sup>th</sup> - slight improvement in patient's  
condition today, tongue cleaning  
but dry.

Temp 103.2, Pulse 96, Resp 16, Bowels 0

" 11 - looks rather better today, sleeps fairly  
well - no spots,

Temp 99.4, Pulse 84, Resp 16, Bowels 1

" 12 - Tongue cleaning, appetite increasing  
Temp 101, Pulse 100, Resp 20, Bowels 1 - partly  
formed,

13<sup>th</sup> - not quite so well today, Bowels not  
acting very well, ordered castor oil.

Temp 101.8, Pulse 108.

Mar 14 - Bowels moved freely after oil  
Temp 100.8, Pulse 90, Resp 20

15 - Cough seems worse today. increased  
Cough Mixture

Temp 100.6, Pulse 94, Resp 24, Bowels 0

18 - Considerably better today, tongue  
quite clean, no cough

Temp 98.4, Pulse 90, Resp 24, Bowels 2 +  
Motion formed

19 - Improvement steadily going on

Temp 98.4, Pulse 104, Resp 16, Bowels 1

23 - Rapid improvement, strength increasing,  
ordered Time.

24 - Much better, up today, takes food  
well.

April 2-8-13. Temp & Pulse normal throughout,  
Bowels regular and formed.

" 14 Sent home today -

James Cairns, Act 35, Brickmaker -  
 Feb 27. Has not felt well for some days, looks ill, bowels regular, tongue coated, thirst, pain in the back and general malaise,

Temp 102.6, Pulse 90, Resp 20.

Mar 1<sup>st</sup>. - feeling a little better today  
 Temp 101.6, Resp 20, Pulse 86, Bowels 0.

No spots, ordered castor oil.

3<sup>a</sup> - Bowels moved freely after oil, loose and yellow in colour.

Temp 100.8, Pulse 80, Resp 18

5 - looks much worse today, has passed a bad night, does not sleep, complains of pain in the belly which is tender on pressure

Temp 102.8, Pulse 90, Resp 20. Bowels twice since 3<sup>a</sup>.

6<sup>th</sup> - Sent to Fever Hospital

8<sup>th</sup> - Extracted from Journal - Tongue covered with whitish brown fur moist at edges.

Slight sores on teeth, bowels not very loose but typhoid in character  
Temp 100.6, Pulse 86, Resp 20,

Mar 9 - Much in the same condition. Thirst greatly diminished

Temp 100, Pulse 86, Resp 22, Bowels 2

11 - Complained of pain in the bowels yesterday, got a compound Kino powder and is better today

Temp 99.4, Pulse 80, Resp 18, Bowels 1

12 - Tongue beginning to clean.

Temp 99.2, Pulse 98, Resp 18, B 1

13 - Looks better today, appetite returning

Temp 99, Pulse 76, Resp 18, B 1

14 - Improvement still going on, tongue clean and moist

Temp 99.4, Pulse 80, Resp 16, B 0

15. Skin Natural. Bowels constipated

Temp 98.2, Pulse 76, Resp 14.

18 - Better looking, hungry now, ordered Magnesia

Temp 98.2, Pulse 80.

Mar 19<sup>th</sup> - Tongue cleaner than it has been since turning ill. No cough.

Temp 97.8, Pulse 80, Bowels 3 after Magnesia

22. Temp & Pulse normal for 3 days  
Bowels regular and motion formed  
Got soup yesterday & seems more the worse.

29. Temp & Pulse normal, appetite good,  
rising today.

April 2. Getting up for 6 hours daily,  
improving rapidly, putting on flesh.

13 - continued to improve and  
went home today.

Katie Bonnar - abt 5½ years.

Feb 17 - Has been in bed for nearly a week.  
feels hot in the skin, restless & unable  
to take food, bowels regular. Thirst  
moderate, furred tongue

Temp 101.4, Pulse 90. Resp 20.

ordered castor oil.

Feb 18<sup>th</sup> - Bowels loose after castor oil, soft & yellow in colour. abdomen moderately distended. Spleen below border of ribs, a few very distinct typhoid fever spots out today.

Temp 102, Pulse 100, Resp 24, ordered

3 Grains Antifebrine every four hours.  
19<sup>th</sup> looks a little better like today

Temp 101.4, Pulse 96, Resp 20, Bowels 0

20<sup>th</sup> - Still improving - patient feels better.  
Temp 100.8, Pulse 96, Resp 22, Bowels 2.

21<sup>st</sup>. Not so well today - gave more Antifebrine  
Temp 101.6, Pulse 100, Resp 24, Bowels 3

22<sup>a</sup> - Much the same as yesterday.

23<sup>a</sup>. Better like today, feels more comfortable  
Temp 100.6, Pulse 90, Resp 20, Bowels 0

24<sup>th</sup>. Not so well as yesterday - Resp 24  
Temp 102°, Pulse 110, B O, ordered castor oil

25<sup>th</sup> Several motions owing to oil

Temp 102.4, Pulse 120, Resp. 28,

26<sup>th</sup> Feels better today. Temp. 101.2, P 100, B 2

Feb 27<sup>th</sup> Very bad today, restlessness & feverish  
Temp 103°, Pulse 120, Resp 30. Bowel 3 and  
typical in character, gave antifebrine

28<sup>th</sup> feeling a little better today  
Temp 101'8, Pulse 116, Resp 24, Bowels 1

Mar 1<sup>st</sup>. Better today than has been as yet  
Temp 99'8, Pulse 100, Resp 24. B 2

2<sup>nd</sup> A little worse today  
Temp 101' Pulse 120, Resp 28. B 0.  
Sent to Flier Hospital.

3<sup>d</sup> Extracted from Journal. Tongue cleaning  
no appetite, Temp 100'2, Pulse 132, R 32, B 1

4<sup>th</sup> Passed a good night, no pain  
anywhere. No splenic enlargement  
Temp 99'8, Pulse 116, Resp 30, B 0

6<sup>th</sup> Temp 101'4. Pulse 120, Resp 28, B 0

7<sup>th</sup> Measles rash out today.

8<sup>th</sup> Measles rash still out  
Temp 99'2, Pulse 120, Resp 34. B 2

9<sup>th</sup> Patient improving & rash fading  
Temp 99°, Pulse 112, Resp 30 - B 0.



Mar 11<sup>th</sup>. Rash away. has slight cough  
ordered castor oil

Temp 99.6, Pulse 90, Resp 24, Bowels 0

12<sup>th</sup>. Patient improving skin beginning to desquamate. Bowels still confined. ordered more oil Temp 99.

13<sup>th</sup> Temp 103.4, Pulse 110, Resp 24, Bowels 3  
after oil, rise in temperature not due  
to any chest complication so far as  
determined today.

14<sup>th</sup> looks dull today, cough softer  
Temp 101.8, Pulse 114, Resp 26, B 1

15<sup>th</sup> Much the same as yesterday, some  
coarse Bronchitic rales at the base.  
Upright lung, ordered cough mixture.  
Temp 103°, Pulse 118, Resp 30, B 0

18<sup>th</sup> Patient improving, tongue cleaning.  
Temp 100.6, Pulse 90, Resp 25, B constipated  
Ordered castor oil

19. Rather better today, tongue quite  
clean, Bowels loose after oil.

Mar 11<sup>th</sup>. Rash away. has slight cough  
ordered castor oil

Temp 99.6, Pulse 90, Resp 24, Bowels 0

12<sup>th</sup>. Patient improving skin beginning to desquamate. Bowels still confined. ordered more oil Temp 99.

13<sup>th</sup> Temp 103.4, Pulse 110, Resp 24, Bowels 3  
after oil, rise in temperature not due  
to any chest complication so far as  
determined today.

14<sup>th</sup> looks dull today, cough softer  
Temp 101.8, Pulse 114, Resp 26, B 1

15<sup>th</sup> Much the same as yesterday, some  
coarse Bronchitic rales at the base.  
Upright lung, ordered cough mixture.  
Temp 103°, Pulse 118, Resp 30, B 0

18<sup>th</sup> Patient improving, tongue cleaning.  
Temp 100.6, Pulse 90, Resp 25, B constipated  
Ordered castor oil

19. Rather better today, tongue quite  
clean, Bowels loose after oil.

Mar 22<sup>nd</sup> - Cough gone, sleeps well, bowels regular & formed.

24<sup>th</sup> - Still improving.

29<sup>th</sup> - Getting out of bed.

April 2<sup>nd</sup> - doing very well.

6<sup>th</sup> - Went home today.

## Eoster Barclay. act 8½ years.

Feb 18<sup>th</sup> - Has been ill about a week, looks feeble. Pupils widely dilated, sores on lips & teeth, tongue glazed, no spots. Bowels frequent

Temp 100.4, Pulse 110, Resp 30, gave Anti-

Feb 20<sup>th</sup> - Feels rather better today. Bowels not so frequent, Temp 99.2, Pulse 100, Resp 24 <sup>febrine</sup>

22<sup>nd</sup> - Restless & fretful. Bowels still loose, dark green offensive motions passed in bed, Temp 100.6, Pulse 100, Resp 26.

24<sup>th</sup> - Feeling a little better today. Bowels not so frequent. No spots. No splenic enlargement. Temp 100.4, P 100, R 24.

- Feb 27<sup>th</sup>. Much worse today, tongue dry and glazed - Temp 102°, Pulse 120, Resp 30, Bowels constipated, ordered oil & Antifebrine.
- Mar 1<sup>st</sup> - Much in the same condition. Bowels loose after oil, Temp 101.6, Pulse 116, R 30.
- 2<sup>nd</sup> Sent to Hospital -
- 3 - Taken from Journal - Tongue glazed at point & furred at back. frequent troublesome cough, Bowels loose & dark green in colour - ordered 3 M of Eucalyptus in 3p of Olive. Temp 100.4, Pulse 110, R 28
- 4<sup>th</sup> - Restless night, tongue moist & cleaner Bowels still the same in character but not so frequent. Vomited some bilious matter, Temp 99.8, Pulse 100 & feeble, R 24
- 5<sup>th</sup> - Passed a bad night -  
Temp 103, P 120, Resp 30, B 0
- 6<sup>th</sup> - Much in same condition  
Temp 102.4, Pulse 110, Resp 30, B 1
- 8<sup>th</sup> - Distinctly better, tongue clearing, furred at back, Temp 102.2, Pulse 120, Bowels none for 2 days - feeling hungry, R 36

Mar 9<sup>th</sup> - Still Keeping better

Temp 101.4, Pulse 104, Resp 24, B 0

11<sup>th</sup> - Slept well last night, Bowels constipated  
feels stronger Looks it

Temp 101 Pulse 100, Resp 18

12<sup>th</sup> Still improving, tongue cleaning, hungry  
Temp 102.6, P 116, R 24, B constipated.

ordered castor oil.

13<sup>th</sup> Feels a little better today, tongue dry  
& glazed, no thirst, Bowels 3 after  
oil 1 loose & 2 formed, Temp 102

14<sup>th</sup> - Tongue cleaning, sleeping more  
Temp 102 - P 114, R 24, B 1

15<sup>th</sup> - Much the same as yesterday, slight  
cough Temp 102.4, P 120, R 28, B 1, ordered  
1/2 gr Antifebrine & 4 hours Castor oil

18<sup>th</sup> Diarrhoea since yesterday owing  
to oil, tongue dry & glazed, cough  
soft & not troublesome

Temp 101.8, P 120, R 24.

- Mar 19<sup>th</sup>. Scurchily bowel today, diarrhoea continuing, motions dark, slimy & offensive, tongue slightly coated  
Temp 102.6, P 122, R 26, ordered  
Gr catechu for diarrhoea & Stimulants
- 23<sup>d</sup>. The diarrhoea for the past 3 days has been worse, Temp 102°, P 120  
ordered Pulv Kino Co. & Antifebrile.
- 25<sup>th</sup> Looking a little better, tongue quite clean & moist, bowels still loose, stopped antifebrile but continued P Kino Co. Temp 102°, P 122, R 20.
- 29<sup>th</sup>. Much better today, taking food bowels regular, ordered Ext of Malt
- April 2<sup>nd</sup>. Improving very slowly, temp normal  
pulse feeble - no cruch
- 8<sup>th</sup> Bowels have been troublesome again  
stopped everything but Milk & lime water  
farinaceous foods does not agree at all  
Temp 102° P 120. R 20.

- April 10<sup>th</sup> - Bowels improved in condition,  
tongue clean & moist. General appearance  
improved,  
13<sup>th</sup> Much better now, tonic treatment  
continued.  
21<sup>st</sup> - Very much better, pulse & temp-  
normal,  
27 - Went home today.

John McAra - Aet 24 years. Miner -  
Feb 1<sup>st</sup>. Has not felt well for some days, lies  
in bed saying there is nothing the  
matter with him, feeble looking.  
Skin hot & dry, tongue coated with a  
thick brown fur. Pain in the head &  
back, general malaise, bowels loose  
abdomen moderately distended, no  
enlargement of spleen, no spots.  
Temp 102.2, P 100, Resp 24.  
Treatment Nickaline water, Barley  
water & Chlorate of Potash.

- Feb 3<sup>d</sup> - Much in the same condition, Bowels  
3 since 1<sup>st</sup> and typhoid in character,  
Temp 102°, P 108, Resp 26. Treatment as before
- 5<sup>th</sup> - Not so feeble like today, tongue dry & fayed  
in centre, a few spots out today for  
first time, bowels moderately loose but  
typical Temp 102°, P 116, R 28
- 7<sup>th</sup> - The Patient says he feels better today.  
tongue still dry & fayed, sores on teeth  
Temp 101.6, P 110, Resp 26
- 10<sup>th</sup> - Not feeling so well today, a fresh  
crop of spots out, bad headache, bowels  
twice every day but loose & yellow in colour  
Temp 102.8, Pulse 120, R 30
- 12<sup>th</sup> - Much in the same condition as on  
last visit, tongue not so dry & fayed  
Temp 102.2, P 120, R 30, B once daily
- 14<sup>th</sup> - Better like today, looks fresher, bowels  
constipated, ordered castor oil  
Temp 102°, P 100, R 24
- 16 - Feeling much in the same condition.  
Bowels loose with oil, Temp 102, P 106, R 28,



Feb 18<sup>th</sup>. Not looking so well today. Feels floored very weak. lies prostrate & appears very pale. does not ask for anything. skin very dry. sores on teeth & lips. tongue dry brown & fissured in centre

Temp 102.4. P 112, R 28. Bowels loose

20<sup>th</sup> - looks better like today, tongue moist  
Bowels 2 since last day. T 101.8. P 100, R 24.

22<sup>nd</sup> Still keeping better. takes more interest in what is going on around him, tongue beginning to clean. T 101.4. P 106, R 30

24<sup>th</sup>. A good deal better today, tongue moist & cleaning, sores disappearing from teeth  
T 101.2. P 98. R 26. Bowels constipated.

26<sup>th</sup> Still improving. Bowels loose after oil  
Temp 100. P 96, R 24.

28<sup>th</sup> Much better, bowels 3 since 26<sup>th</sup>  
Temp 99.8. P 90, R 20.

Mar 2<sup>nd</sup> Still improving. Bowels regular, light food ordered. T 99. P 86, R 20.

4<sup>th</sup> A great deal worse today, has evidently

been taking too much food. diarrhoea. very weak J 99'6, P 106, R 28

Sent to Hospital

Mar 6<sup>th</sup> - Nothing particular to note except feebleness & prostration, appetite moderate bowels tending to diarrhoea

J 99'8, P 96, R 20

8 - Bowels regular & motion formed Temp subnormal 98°, P 92.

11<sup>th</sup> Tongue cleaning, had kept tea yesterday and none the worse spit - J & P normal

13<sup>th</sup> - Appetite good, bowels regular, tongue not quite so clean as yesterday, ordered

15<sup>th</sup> - Tongue clean, bowels 3 with <sup>magnesia</sup>

feels stronger, is to get up

18<sup>th</sup> - Much stronger.

22<sup>nd</sup> - Going about improving rapidly

29<sup>th</sup> going home today.

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Lamont Watson, act 10½ years.

April 13<sup>th</sup> - Went to bed yesterday complaining of  
shivering, considerable thirst, fever, dryness  
of skin, pain in the back of head, looks very ill.  
tongue dry & glazed, slight cough but no  
râles in chest, ordered Antifebrine 4 grains  
every 6 hours & a teaspoonful of whiskey every  
3 hours. Temp 103°, P 120, R 30, B loose.

14<sup>th</sup>. Not any better today, had been delirious  
during the night, bowels still loose &  
typhoid in character, oracles on teeth & lips  
Temp 102°4, P 118, R 28

15 very bad today, a few spots out on  
abdomen, answers questions when spoken  
to but takes no interest in anything  
T 102° P 120, R 30, B 3 since yesterday.

16<sup>th</sup> Much in the same condition, still gets  
delirious at night, tongue brown, dry &  
cracked, face flushed, pupils enlarged  
mesplenic enlargement, R 32  
T 102°8, P 120, B 4 since yesterday.

April 17<sup>th</sup>. Much in the same condition as yesterday  
Temp 102.8, P 116, R 30, B 3

" 18<sup>th</sup> Feeling a little better today. does not  
sleep well however. feels very hot and  
his tongue looks like a piece of boiled  
leather. T 103.4, P 112, R 28, B 3.

19<sup>th</sup> Not any better, skin perspiring some  
more spots out. T 102.4, P 124, R 32, B 2

20<sup>th</sup> This boy's condition appears worse today  
although his temperature is not any higher  
slight cough. T 102.8, P 120, R 28, B 4

Sent to the Hospital

Extract from Journal -

April 22<sup>nd</sup>. This boy is dull & does not answer  
questions readily, skin dry. sores on  
teeth, thirst considerable, bowels

frequent & characteristically typhoid  
T 103.6. P 127. R 40, ordered antifebrile  
& of Eucalyptus

23<sup>rd</sup>. Had pain in abdomen but a poultice relieved  
it T 97.6. P 104.

April 24<sup>th</sup>. Bowels free & dark in colour. Passed a considerable quantity of blood per rectum  
T 97.6, P 104.

25<sup>th</sup> - does not sleep well. Troublesome cough,  
T 102.4. P 112

26<sup>th</sup> looks much better. face without anxious look. perspiring freely. had a slight sleep the first since admission. tongue cleaning, bowels loose & more of natural typhoid stool, T 97.8. P 100. R 29.

27<sup>th</sup> Had a fairly good night. looks better tongue cleaner, bowels still loose cough less frequent & softer  
Temp 99. P 114. R 33.

28<sup>th</sup>. Slept fairly well. cough rather worse no delirium, bowels 4 since yesterday no blood. thirst moderate

Temp 98.9. P 104. R 30.

29<sup>th</sup> Fairly good night. Bowels not so often & stools improved, tongue a little dry cough less troublesome. T 99.8, P 100.

April 30<sup>th</sup>, appears to be keeping better, cough soft  
Bowels 4. Temp 103° 4. P 120. R 24

May 1<sup>st</sup>. Passed a good night & keeping well today  
No appetite. cough very trifling  
T 102°, P 110. R 32. B 3 less loose.

2<sup>nd</sup> Much in same state, skin natural, tongue  
moist. T 102°, P 113, R 32. B 3

3<sup>rd</sup> Seems much the same, skin covered with  
free perspiration. Bowels 2 last motion  
formed T 103°, P 114. R 30.

4<sup>th</sup>. A little better today, tongue moist-  
skin acting freely. T 102° 2. P 113. R 30. B 1

5<sup>th</sup>. Searched so well, looks very feeble, tongue  
more furred. irritable cough T 103° 2. P 130. R 30  
increased stimulants, & antifebrine.

6<sup>th</sup> looks much better, cough easier, slept well  
T 101° 6. P 110. R 20. B 2 partly formed.

7<sup>th</sup> Improving & tongue cleaning  
T 101° 2. P 110. R 20. B 2

9<sup>th</sup> - Tongue not so ~~clean~~, bowels loose  
not formed, T 102° 6. P 117. R 29

- May 10 - Better today, tongue cleaner, a small  
bit of fish allowed J 98'6, P100, R27, B1
- 11 - Better, improving, ordered oil  
J ~~98'6~~<sup>101'2</sup>, P104, R24, Bowels constipated
13. Still improving J98'6, P104, R20, B1
- 14, Seems Reaching better, tongue cleaning  
J 99'2, P116, Bowels regular
- 15 - Tongue whiter a little but moist  
J102', P120, R30, Bowels regular
- 16 - Had a little castor oil Bowels acted twice  
J100'2, R24, P120
17. Getting better, tongue moist, natural  
motion, appetite good. J99'4, P100,
- 18 - Up a little today. J100'2, P112, B1
- 19 - Reaching well, improving in appearance  
appetite good, bowels regular, no  
sickness, pain now enough PBJ normal.
- 21<sup>st</sup> Getting up today.
- 30 - Went home today.

Samuel Sebbie - aet 14 years - School Boy -  
 April 12<sup>th</sup>. Fell ill three days ago but only went  
 to bed yesterday. face flushed. tongue  
 dry and brown. skin hot. great thirst  
 pain in head & back. no spots nor  
 enlargement. bowels loose. ordered  
 Antifebrine 3 gr every 6 hours & blerac  
 of Potash for diarrhoea  
 T 102°. P 120. R 30

14<sup>th</sup>. Not any better today but symptoms  
 rather more pronounced, does not  
 sleep well T 102.6. P 112. R 32. B very  
 loose & characteristic in colour

16<sup>th</sup>. A good deal better today. skin beginning  
 to clear. not so oppressed. thirst not so  
 great T 100°. P 96. R 24. B still loose

20<sup>th</sup>. Not looking any better today  
 surface of the skin feels very hot.  
 tongue rather more furrowed  
 T 101°. P 120. R 28. B 3

21<sup>st</sup> - sent to Fever Hospital



Extracted from Journal - Skin moist but hot  
tongue dry brown in centre. face flushed  
no headache. a trifling cough. ordered  
Antifebrine & Eucalyptus

T 103.8, P 110, R 32, B loose

April 23<sup>d</sup>. T 98.6, P 96, R 26, B 3

24<sup>th</sup> - very restless during the night

T 102, P 110, B loose

25<sup>th</sup> - looks very hot. slept well

T 102.8, P 108, B frequent

26<sup>th</sup> - Thirst slight. seems improving

Generally T 101.6, P 96, B 5

27<sup>th</sup>. Passed a good night. tongue cleaning  
crying with hunger. cough not bad.

T 103, P 106, R 28,

28<sup>th</sup>. Not so well this morning. restless night  
looks flushed, tongue rather brownish,  
thirst greater, bowels still loose, motion  
scanty but frequently up at stool. skin  
moist. ordered P. Hino Co. T 101.5, P 100, R 20

29<sup>th</sup>. Bowels better. looks improved. had a  
good night T 101.4, P 100, R 20.

April 30<sup>th</sup>: Fair night. getting better, bowels improved. slight cough T102.8, P100, R22.

May 1<sup>st</sup>: Improving, perspiring freely. rather better T100. P90. R20, B3.

2. Improving. T99.2. P100. R20, B3

3<sup>rd</sup>: Getting better quickly, tongue cleaning, getting hungry. T98.4. P86, B1

4<sup>th</sup>: Tongue rather more furred, appetite increasing. had some rice. T98.6, P80, R20

5<sup>th</sup>: Slightly better. feels none the worse of this rice. Stop Antifebrine. T98.6, P90, R20

6<sup>th</sup>: Feels well. no headache. ordered oil  
T99.2. P72. R16, B1

7<sup>th</sup>: Keeping better. T101.2. P80. R18, B3

9<sup>th</sup>: Worse today, face flushed, tongue much whiter, no cough. ordered Antifebrine

Temp 105°. P120, R22. B2

10<sup>th</sup>: Rather better today T103.8, P110, R24, B1

11<sup>th</sup>: Improved. Still flushed T103. P104. R20

13<sup>th</sup>: Not keeping so well. tongue dry & furred  
bowels loose. evidently a relapse  
ordered antifebrine & milk only T103.8, P116

- May 14<sup>th</sup>. A little better today, tongue cleaner  
bowels still loose. T 104°. P 120.
- 15<sup>th</sup>. Tongue very dry, bowels constipated.  
ordered castor oil, Stimulants & increased  
artificial urine Temp 105° 6. P 130, R 22.
- 16<sup>th</sup> Much better like today, tongue cleaner  
& not so tremulous when put out -  
Temp 103° 2. P 116. R 20, B 2.
- 17<sup>th</sup>. Improved, tongue clean & moist -  
T 103° 2. P 110. R 24. B 0.
- 18<sup>th</sup> Stronger & very hungry - T 101°. P 104. B 0
- 19<sup>th</sup> Looks pale but not so feeble, ordered  
Benger's food. T 101°. P 100. B 1 formed.
- 20<sup>th</sup> Much better today, tongue quite clean  
& moist - T 98° 2. P 96. B 1 formed.
- 21<sup>st</sup>. Forget Buzzea, P & T normal.
- 26<sup>th</sup> Still Keeping Normal.
- June 1<sup>st</sup>. Went home.

Jeanie Watson, age 18 years. Domestic Servant.  
 April 12<sup>th</sup>. Took to bed yesterday suffering from  
 headache, sickness, vomiting, thirst,  
 dry skin & Constipation. ordered  
 antifebrine & milk diet. castor oil  
 T 102°, P 120, R 30.

14<sup>th</sup> Not any better today. fever rather high.  
 thirst greater, tongue furred. oil not acted  
 ordered more. T 102.4, P 116, R 28.

16<sup>th</sup>. Feeling a little better, vomiting ceased  
 thirst not so great, bowels loose after  
 oil, yellow in colour & offensive. T 101, P 100, R 32.

18<sup>th</sup>. Much in the same condition, diarrhoea  
 troublesome, a few spots on abdomen. T 101.4, P 110, R 30.

20<sup>th</sup>. Rather worse today. T 102.2, P 110, R 28, B 3.

21<sup>st</sup>. Sent to Fever Hospital - Extract from  
 Journal. Tongue covered with whitish fur  
 thirst moderate, no cough, bowels frequent  
 a few spots on abdomen. no cough. T 103.6, P 114, R 28.

23<sup>d</sup>. Slight cough T 101, P 103, R 29, B 3.

24<sup>th</sup> Bowels loose, looks & sleeps well,  
 T 101.6, P 110.

April 25<sup>th</sup>. Face flushed, ordered double doses of Antifebrin  
T 103°, P 116.

26<sup>th</sup> Quiet night without much sleep  
cough & diarrhoea troublesome. tongue  
dry brown, sores on teeth, ordered  
cough mixture. T 104° 6. P 124. R 42

27<sup>th</sup>. Seems improving, had a fairly good  
night, tongue clean at edges but dry &  
furred in centre, thirst considerable  
bowels very loose, push Antifebrin, more  
spits out T 105, P 124, R 40.

28<sup>th</sup>. Looks a little better today but had a  
bad night, retching & getting nothing  
up, cough not so bad, skin moist-matted  
bowels in motion every hour, no blood.  
Mustard blister over stomach & Pehr  
Kino 60 for diarrhoea T 102° 2. P 113. R 48

29<sup>th</sup>. Still much in the same state, still  
thirsty, tongue dry & furred in centre  
retching less than hitherto  
T 102° 4. P 120. R 40.

April 30<sup>th</sup>. Restless night, no sleep. tongue cracked  
but rather moist T 103.8, P 120, R 42, B 2

May 1<sup>st</sup>. Slept a little last night. tongue  
moister, cracks less prominent. Bowels  
4 since yesterday, tendency to vomit  
after cough T 101, P 110, R 40.

2<sup>nd</sup>. Severe abdominal pain last night  
which was relieved by poultice. tongue  
dry & furled, pain comes at times  
T 99.8, P 117, R 38, B 0

3<sup>rd</sup> Better today, slept better, tongue  
cleaning, cracks disappearing, cough  
easy. no pain nor retching T 99.2, P 90.

4<sup>th</sup>. Looking better, tongue dry again &  
cracked, cough bad at night T 98, P 104, B 1

5<sup>th</sup> Improving, looks cool, tongue cleaning, cracks  
almost gone. T 98.2, P 110, R 30, B 2

6<sup>th</sup> Rather better, slept well, tongue cleaning  
ordered Beuge's food T 98.2, P 92, B 2.

7<sup>th</sup> Improving, would not take Beuge's food  
Gave semolina T 98, P 88, B 16

May 9<sup>th</sup>. Improving. Getting Fish & Potatoes  
T 98.8, P 80, B 1.

10<sup>th</sup> - Getting well quickly, tongue clean  
bowels regular. T 98.4, P 78.

11<sup>th</sup>. Getting up.

13<sup>th</sup>. Still keeping better P & T normal.

15<sup>th</sup> Up for 4 hours daily.

17<sup>th</sup> Been going out.

June 1<sup>st</sup>. Went home.

Alexander Cairns - Aet 14 years, Pithead Boy -

April 25<sup>th</sup>. Has not been feeling well for a week.

Sickness, vomiting, retching, pain in the  
back, thirst, loss of appetite, headache, pain  
in the limbs & perishingness especially at night  
tongue coated with a white fur, diarrhoea  
T 101.6, P 90 feeble, R 20

26<sup>th</sup>. ordered Antifebrine & Chlorate of Potash  
feeling better, diarrhoea not so bad but  
characteristic in colour & offensive  
Still sick with tendency to retch  
T 101, P 96, R 24, B 3

April 27. Evidently worse today. tongue dry brown  
 cordes on teeth & lips, still thirsty. headache  
 very bad, T 102.4, P 88, R 22, B 2.

28. Much the same as yesterday, if anything  
 worse. increase of sores on teeth & lips  
 tongue dry brown in the centre, red at  
 the tip. headache not so troublesome. <sup>B 2</sup>  
 sleep well. lies very quiet. T 103, P 90, R 20.

29. T 102.6, P 100, R 28, B 2

30. Feeling a little better today. Bowels  
 loose & very offensive. tongue still dry &  
 brown. T 102, P 98, R 30.

May 1<sup>st</sup>. Much the same as yesterday. Skin very  
 hot & dry. bowels not so frequent. tongue  
 dry & cracked. T 103.2, P 110, R 24, B 3

2<sup>nd</sup>. T 102.6, P 100, R 20, B 1

3<sup>rd</sup>. A great deal worse today & symptoms  
 more pronounced, bowels still frequent  
 T 103.6, P 96, R 28.  
 Sent to Hospital

May 4. Extract from journal - Still the same  
 Eyes & suffused, sores on teeth.



Tongue dry & brown & furred at the back  
 sleeps little, no cough, bowels once since  
 admission but atypical offensive typhoid  
 stool T 102.6, P 84, R 24.

May 5<sup>th</sup> Did not sleep much. expression dull, thirst  
 considerable. T 103°, P 96, R 20, B 2

6<sup>th</sup> Face flushed, eyes suffused, tongue dry  
 sores on teeth & lips more abundant  
 skin dry T 103°, P 96, R 20, B 3.

7<sup>th</sup> Tongue moist today, apparently beginning  
 to improve T 102°, P 96, R 20, B 0.

9<sup>th</sup> Seems to be improving, tongue cleaner  
 T 103° 2, P 100, R 20, B very loose

10<sup>th</sup> Improving, tongue not so dry & patches  
 of which for cleaning T 101.6, P 96, R 18, B 3

11<sup>th</sup> Improving, tongue cleaning, T 101.2, P 96, R 20

13<sup>th</sup> Hungry today for first time, tongue  
 dry, cleaning if anything T 100.6, P 90, R 24, B 2

14<sup>th</sup> Passed a good night. T 101, P 96, R 20, B 2

15<sup>th</sup> Tongue dry but nearly clean T 102.8, P 96, B 2

16<sup>th</sup> Improving, tongue dry & glazed but clean  
 T 101.2, P 90, B 1

- 72  
 May 17<sup>th</sup>, Tongue quite clean, papillae prominent-  
 T104<sup>th</sup>, P96, B2 better colour.  
 18<sup>th</sup> Tongue moist, T101<sup>st</sup>, P86, B1  
 Motion not formed as yet.  
 19<sup>th</sup> Tongue quite clean & moist, to have  
 Reuge's food office T102<sup>nd</sup>, P100, B1  
 20<sup>th</sup> Better today, tongue covered slightly  
 with silvery fur T101<sup>st</sup>, P92, B1  
 21<sup>st</sup> Not so well today, tongue dry  
 covered with whitish fur  
 T102<sup>nd</sup> P98, B1 still worse  
 22<sup>nd</sup> - Feeling better today, tongue cleaning  
 T100<sup>th</sup>, P100, B2  
 23<sup>rd</sup> T108<sup>th</sup>, P125, B2  
 24<sup>th</sup> - Much better today, Skin cool &  
 moist, tongue clean T99<sup>th</sup>, P110, B2  
 25<sup>th</sup> - Still keeping better T99<sup>th</sup>, P100, B2  
 26<sup>th</sup> - Improving very much T99<sup>th</sup>, P96, B2  
 27<sup>th</sup> - P & Temp normal, bowels regular &  
 motion formed.  
 30 Still improving, getting stronger,  
 June 7<sup>th</sup> Went home today.

No spots ever appeared in this case

Jeanie Cairns, Aet 12 years, School girl -  
 April 13<sup>th</sup>. Been ill for some days, not feeling well.  
 Hanging about the fireside, no inclination  
 to go out of doors. Complaints of headache,  
 pain in the back, inability to take food,  
 skin hot & dry, tongue thickly coated  
 with white fur, sickness, pain in the  
 belly, throat, pain & gurgling in the  
 right iliac region, bowels not regular  
 ordered castor oil & antifebrine.

T 100.8, P 96, R 30

14<sup>th</sup> - Feeling a little better today, tongue  
 rather more furred, bowels acted freely  
 after castor oil, very highly coloured  
 and offensive, still thirsty & sick.

T 100.4, P 94, R 28, B 3.

15<sup>th</sup>. Much in the same condition as yesterday.  
 No enlargement of spleen. Bowels still  
 loose & yellow in colour, T 101.2, P 96, R 28

16<sup>th</sup> - Not any better today, slight sores  
 on teeth & lips, not so thirsty, looks  
 worse T 101.8, P 104, R 30, B 2

714

April 17 - Feeling better today. Sickness almost gone, thirst moderate, face flushed. eyes suffused. very feeble exhausted looking, T 101, P 98, R 28, B 3

18 - Much the same as yesterday  
T 101.6, P 96, R 24, B 2

19 - Not so well today, skin very hot & dry, tongue brown & glazed in centre  
T 103°, P 110, R 30, B 3

20 - Patient's mother says she has passed a very restless night, slightly delirious during part of it, nausea & thirst moderate. More sores on teeth, treatment as before  
T 102.4°, P 104, R 30, B 0.

21<sup>st</sup>, T 103.6, P 110, R 32, B worse.

22<sup>nd</sup>, Looks much the same as yesterday  
face flushed, tongue dry & glazed  
T 102°, P 104, R 26, B 2 still worse.

23<sup>rd</sup>. T 103.2, P 100, R 28, B 3

24<sup>th</sup> A great deal worse today, very restless talking a good deal during the night.

delirious, increase antifebrine

T 104, P 120, R 30, B 2

April 25<sup>th</sup>. a little better today, not so pronounced  
lumpy pebble, tongue still dry, sores  
on teeth slips, about 6 spots out to-day  
for first time, T 103.4, P 108, R 28, B 2

26<sup>th</sup> Much in the same condition

T 103.8, P 110, R 28, B 0

27<sup>th</sup> Feeling slightly better today.

quieter & sleeps better, sores not so abundant

T 102.8, P 112, R 32, B 3.

28<sup>th</sup> - Evidently improving, tongue not so dry  
brown, skin moist, T 103.4, P 106, R 24, B 1

29<sup>th</sup> - T 102.2, P 100, R 26, B 2 worse.

30<sup>th</sup> looking better like today, lies very quiet,  
does not ask for anything, thirst not so  
great & no sickness. T 102.8, P 110, R 24, B 2

May 1<sup>st</sup>. Still improving, brighter today

T 101.8, Pulse 96, R 26, B 2 worse

2<sup>nd</sup> - Not so well today.

T 102.4, P 100, R 28, B 0

76

May 3<sup>d</sup>. Skin moist - not so hot, weaker looking,  
T 101, P 84, R 30, B 0

Sent to Fever Hospital -

Extracted from Journal -

May 4<sup>th</sup>. Looks pale & exhausted but not feverish  
tongue covered with moist slimy fur.

ordered oil, spleen not beyond margin  
of ribs, 2 fresh spots on abdomen  
right side. T 99.2, P 80, R 30, B 0.

5<sup>th</sup>. Dull, listless & feeble, rested fairly well  
tongue cleaner T 103, P 104, R 30, B 3

6<sup>th</sup>. Looks better, tongue much as yesterday  
craving for food, ordered Benger's food  
T 98.2, P 80, R 20, B 2

7<sup>th</sup>. Improving, did not like Benger's food  
ordered semolina T 99.2, P 80, R 18,

9<sup>th</sup> - Still improving T 100.6, P 80, R 18, B 2

10<sup>th</sup> - Tongue improving, ordered fish, T 102, P 86, R 20

11<sup>th</sup>. Tongue not quite so clean, T 101.6, P 114, R 24, B 2

13<sup>th</sup>. Tongue covered with thick slimy fur, had  
an attack of vomiting through the night

evidently suffering from a relapse.

T 104°4', P 120, R 32, B loose.

May 14<sup>th</sup> - Much in the same condition today  
no sickness, slight cough, tongue cleaner  
but dry. T 104°2', P 120, R 32, B loose

15<sup>th</sup> - Evidently improving, tongue still dry

T 103°8', P 120, R 40, B 1

16<sup>th</sup> - Rather better, tongue almost clean but dry  
no appetite. T 103°, P 120, R 28, B 4 loose.

17<sup>th</sup> - Had a fair night, bowels very loose  
4 times typical typhoid stools, seems much  
better today. No cough, tongue dry  
glazed & furrowed at the back. Rather more  
sores than yesterday, ordered P Hino &  
stimulants. T 105°2', P 120.

18<sup>th</sup> - Rather better, passed a good night, tongue  
clean but dry. T 102°, P 120.

19<sup>th</sup> - Face flushed, sores on lips & teeth  
tongue dry brown & glazed in centre, very  
thirsty. No cough at all.

T 103°4', P 130, B 1.

78

May 21<sup>st</sup>. Passed a restless night. been sleeping all day. Skin moist. face pale. tongue dry. looks feeble & prostrate; sores on teeth & lips, T 102.2, P 120, B 2

23<sup>rd</sup>. Feeling a little better  
T 103.6, P 110, B 2

25<sup>th</sup>. Apparently a good deal better. tongue cleaning & moist, skin moist  
T 100.4°, P 100, B worse

27<sup>th</sup> Not so well today. tongue more furred  
T 103°, P 120, B still worse

29<sup>th</sup>. Improving, sores disappearing from teeth & lips, T 101°, P 100, B constipated

31<sup>st</sup>. Still improving. looking better & stronger  
Not so prostrate T 100.2°, P 96, B 0.

June 2<sup>nd</sup>. ordered castor oil T 98° P 80, B 0.

3<sup>rd</sup> T 99°, P 84, B 2 motion once formed,  
after 5<sup>th</sup> June Temp & Pulse  
normal and convalescence was  
steady but slow.



- John Cairns, aet 10 years. School Boy -  
 April 6<sup>th</sup>. Took to his bed day before yesterday  
 complaining of sickness vomiting of bilious  
 matter. giddiness headache. thirst &  
 feverishness. diarrhoea. skin hot & dry  
 tongue furred, aching in the limbs.  
 loss of appetite. pain & tenderness in  
 right groin T 102°. P 120. R 28. B 3
- 8<sup>th</sup>. Much in the same condition. thirst  
 more pronounced, tongue dry in centre  
 T 102° 4. P 120. R 30. B 2
- 10<sup>th</sup>. Evidently a great deal worse since  
 yesterday. bleeding from the nose last  
 night. Pupils enlarged. drowsy. looks  
 ill. T 103°. P 128. R 28. B 3
- 12<sup>th</sup>. Looks a little better today. only complains  
 of thirst. no spots nor enlargement of  
 spleen. T 101°. P 120. R 28. B 3.
- 14<sup>th</sup>. Much the same as yesterday. not so  
 thirsty. bowels very loose, sores on  
 lips T 102°. P 120. R 30. B 6

~~May~~ <sup>April</sup> 17. Patient passed a bad night. all the symptoms aggravated. tongue dry & very brown T104°, P128, R 30, B 2.  
Sent to Fever Hospital,

Extracted from Journal.

~~April~~ <sup>April</sup> 20 - Feeling a little better today, thirst not so great, bowels not so loose, no spots on abdomen, tenderness on pressure in right iliac region, T101°6, P130, B28, B2

22<sup>nd</sup> Has not been sleeping well for two nights back. has a tendency to delirium. slight epistaxes, T101°, P120, R 30, B 0

24<sup>th</sup> Feeling comparatively well today. tongue not so dry & brown, skin perspiring slightly. bowels very loose today greenish in color & watery with flocculent matter in suspension T100°4, P116, B28.

26<sup>th</sup> Not so well today. tongue very dry & brown, sores on teeth & lips, bowels not so bad, sleeping better at night but still a tendency to delirium  
T102°, P130, R 30.

April 28<sup>th</sup>. Warts making their appearance  
 and vesperic enlargement, otherwise  
 a typical case of typhoid

T 102°, P 120, R 30, B 2

30<sup>th</sup> - Much in the same condition

T 101.6, P 120, R 28, B 0

May 2<sup>nd</sup>. Patient feels much better today  
 wants food, tongue cleaning, sores  
 disappearing. T 100.4, P 116, R 26, B 2

4<sup>th</sup>. Still improving, slight cough but  
 no bronchitis or congestion

T 99.2, P 100, R 26, B 3

6<sup>th</sup> - Feels and looks better like, tongue  
 not so dry, skin moist.

T 102.4, P 124, R 28, B 2

8<sup>th</sup> - Not so well today, complains  
 of pain in right groin

T 104°, P 130, R 28, B 3

10<sup>th</sup> Feels much better, complains of  
 nothing T 99.2, P 108, R 26, B 3.

82

May 12<sup>th</sup> - T 100.4, P 108, R 26, B 3.

" 14<sup>th</sup> Feels better today than anytime before this. T 99. P 100, R 26, B 0.

" 16<sup>th</sup> Still feeling better

T 98.8, P 104, R 26, B 2

" 18<sup>th</sup> T 100. P 120, R 28, B 2

" 20<sup>th</sup> - Has been very ill since last note, restless, crying a good deal

feels very hot. T 104.8, P 140, R 34, B 3

" 22<sup>nd</sup> - T 100. P 120, R 26, B 2

" 24<sup>th</sup> All the symptoms abating.

Temp subnormal, P 108, R 28, B 2

" 26<sup>th</sup> - Patient looking brighter, complains of hunger, passed a very good night

T 99.6, P 108, R 24, B 3

" 28<sup>th</sup> - T 101, P 120, R 28, B worse

" 29<sup>th</sup> T 100.4, P 120, R 26, B 2

" 31<sup>st</sup> - Tongue moist & cleaning, crying for food, T 101 P 108, R 24, B 2

last motion partly formed

June 2<sup>nd</sup>. J 99.2, P 100, R 24. Bo  
4-6.8 Temp & Pulse Normal  
14<sup>th</sup>. Went home today.

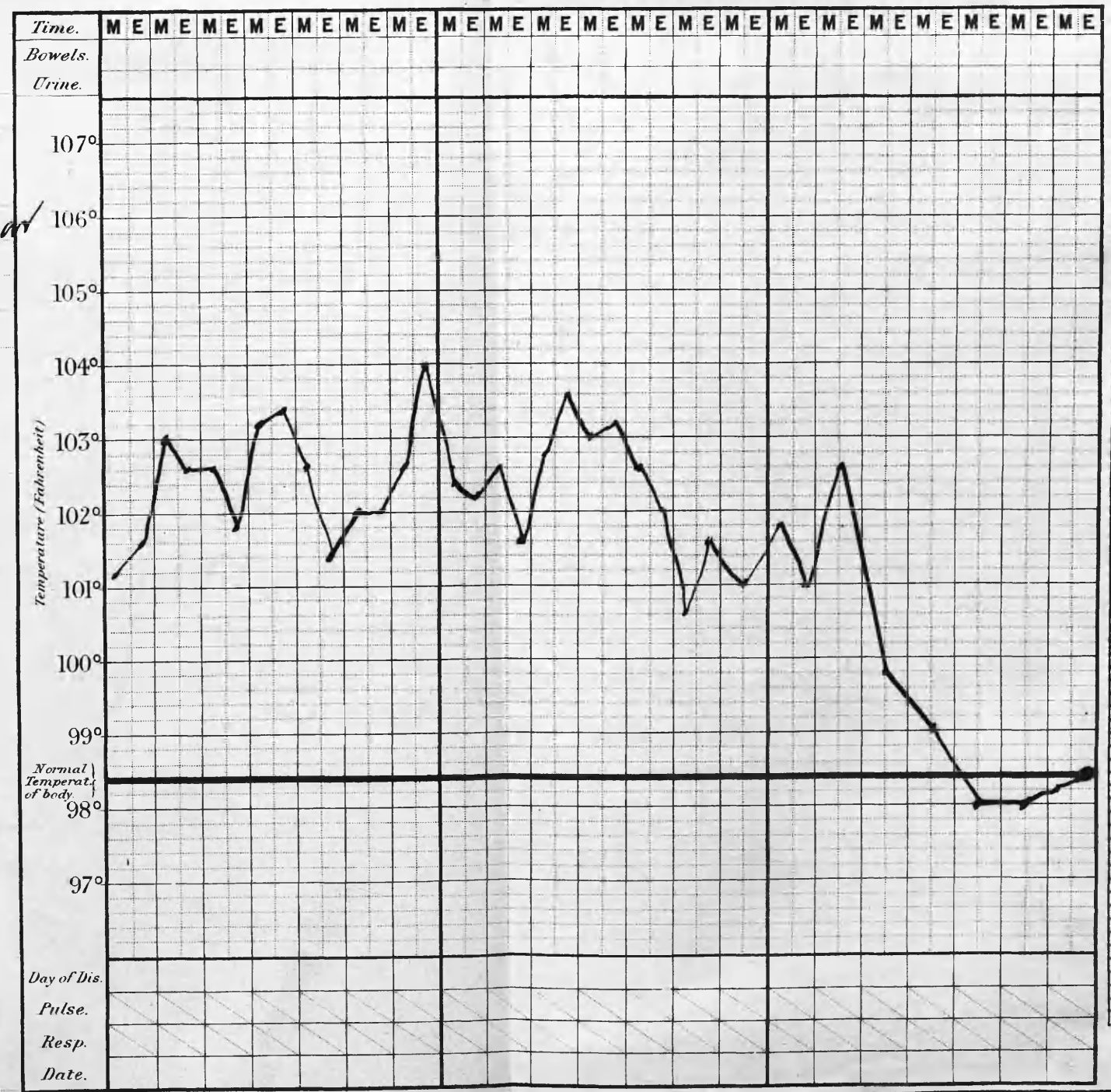
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DISEASE.

Notes of Case.

Name *John Borman*  
 Age *aet 16 yrs*  
 Diet  
 Case Book N<sup>o</sup>

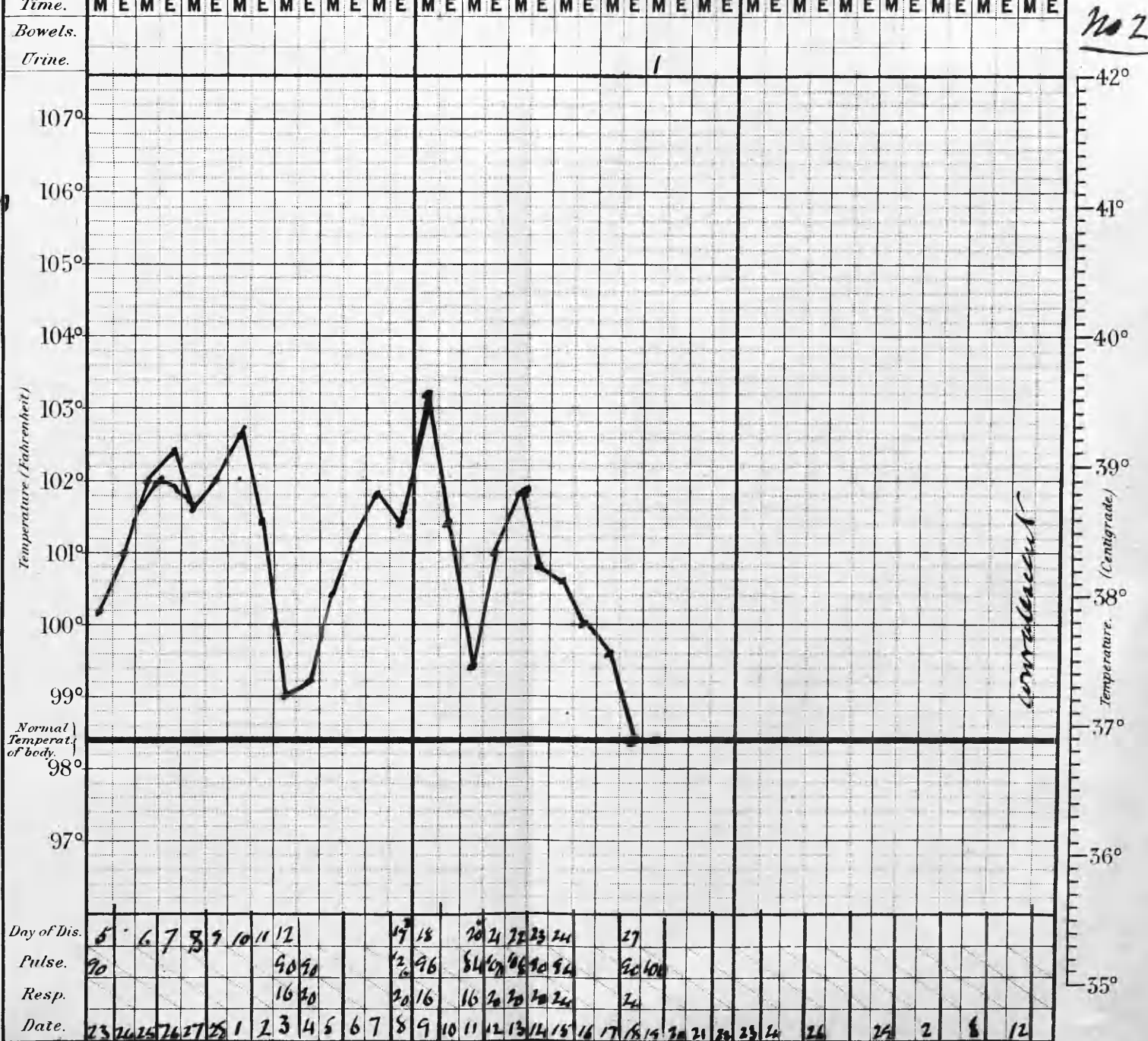


Date of admission.

# DISEASE.

## Notes of Case.

Name { *Robert Gaiman*  
 Age *8 1/2 years*  
 Diet  
 Case Book N<sup>o</sup>





DISEASE.

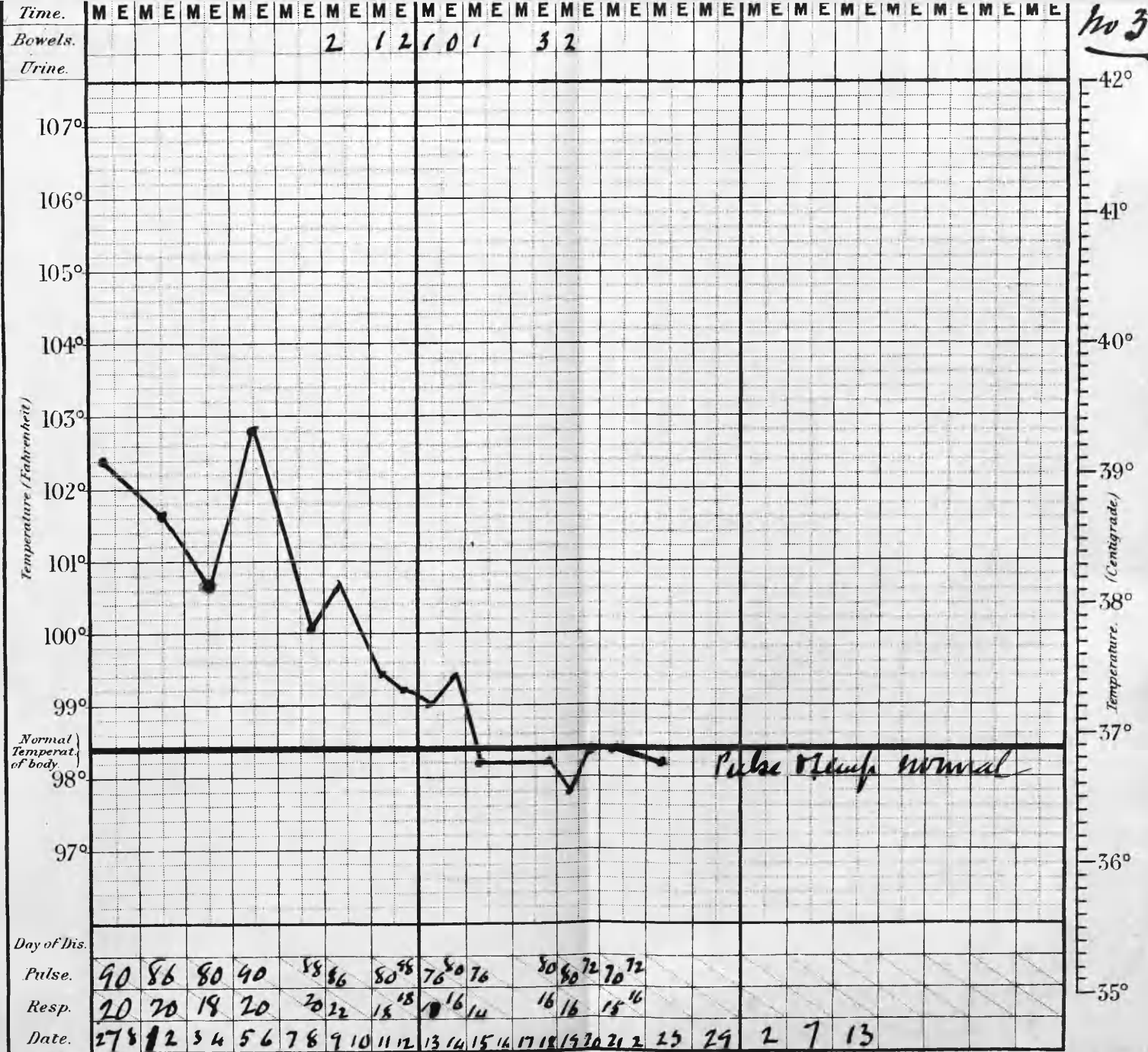
*Notes of Case.*

Name { James Cairns

Age 35 yrs

## Diet

Case Book N.º



*Date of admission.*



## DISEASE

*Notes of Case.*

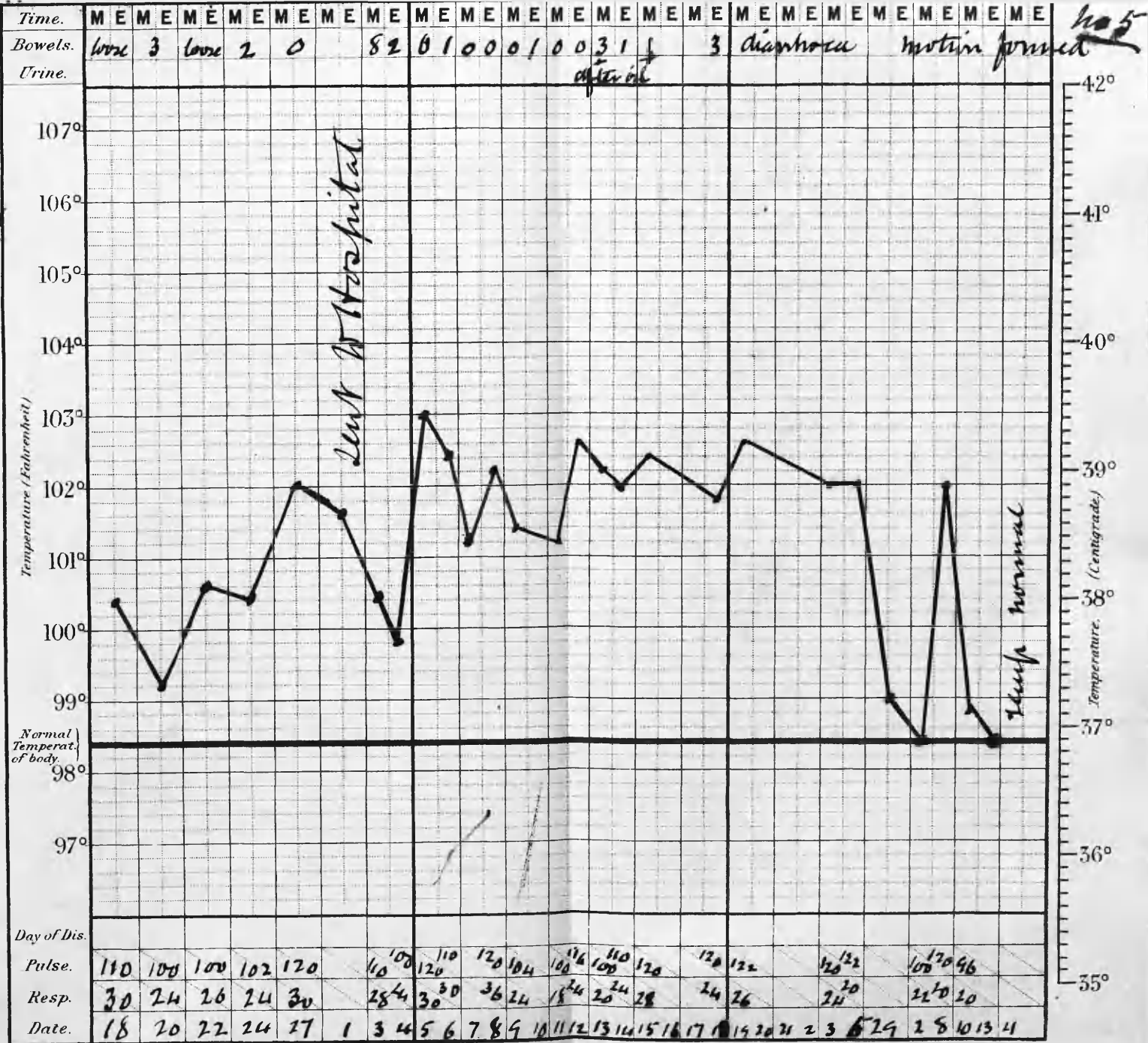
Name { Esther Bardan

Age  $8\frac{1}{2}$  yrs

### Diet

Case Book No.

*Date of admission.*



# DISEASE.

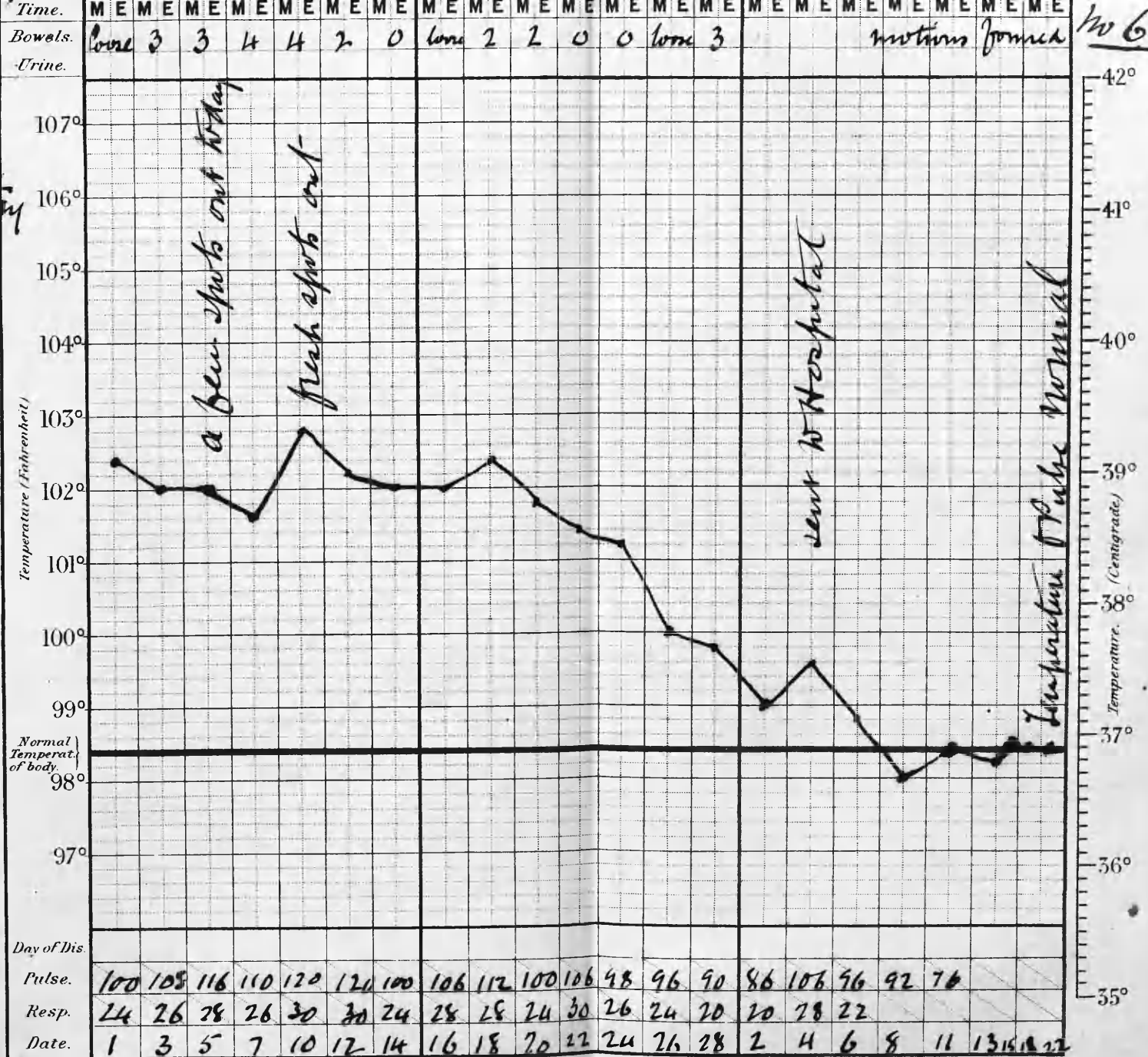
## Notes of Case.

Name

Age

Diet

Case Book N<sup>o</sup>



Date of admission.

7 Feb

Printed and Published by Widderspoon & Co. 15, Sepulchre Street, London, E.C. 4.

Gould's Clinical Chart



# DISEASE.

*Typhoid Fever*

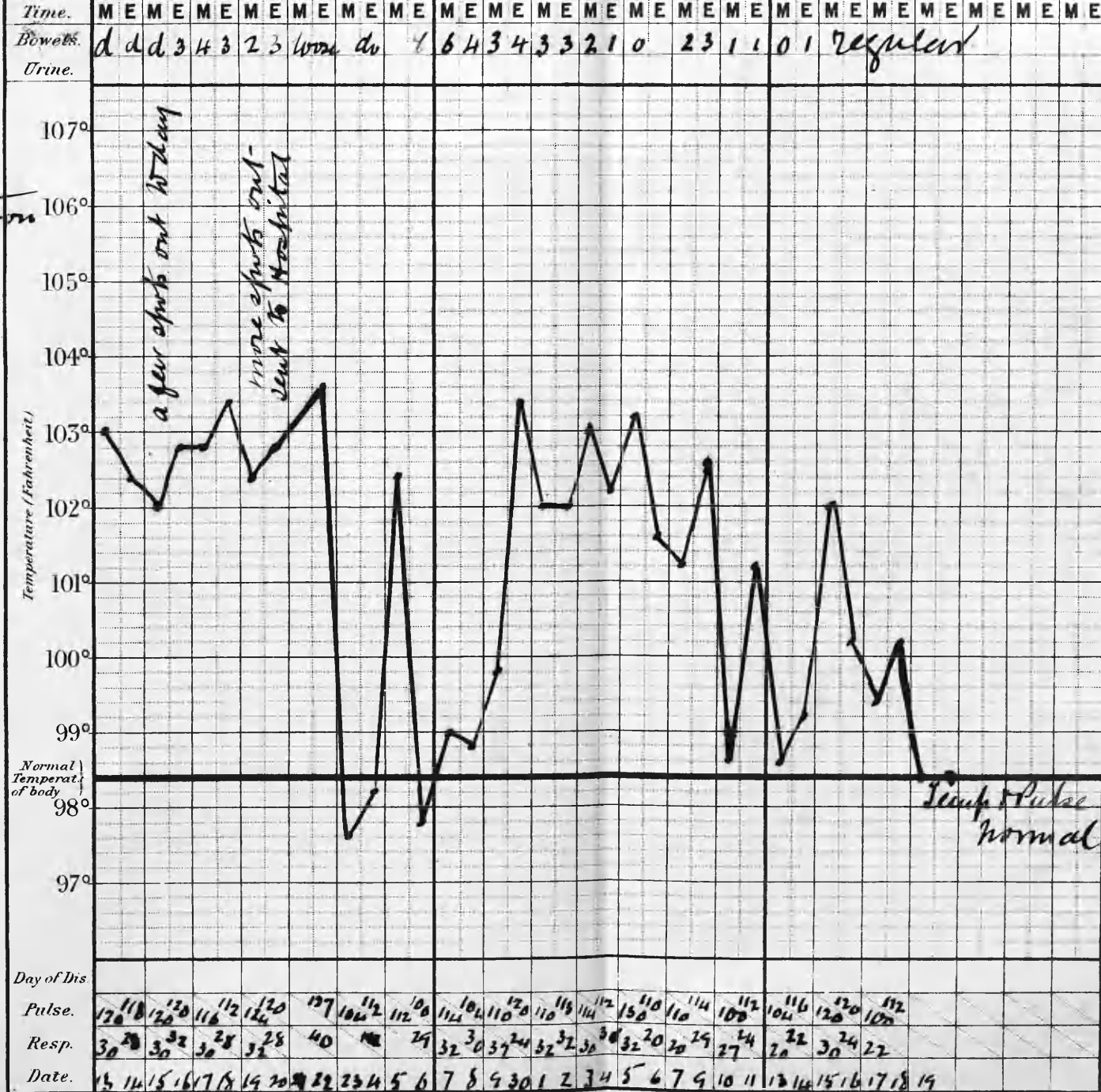
## Notes of Case.

Name *Hamont Watson*

Age *10 1/2 yrs*

Diet

Case Book N<sup>o</sup>



Date of admission.

*admission*

Stationers Hall.

Printed and Published by W. & A. Spooner & Co., 7, Serle Street, Lincoln's Inn

Gould's Clinical Chart.

No 7

42°

41°

40°

39°

38°

37°

36°

35°

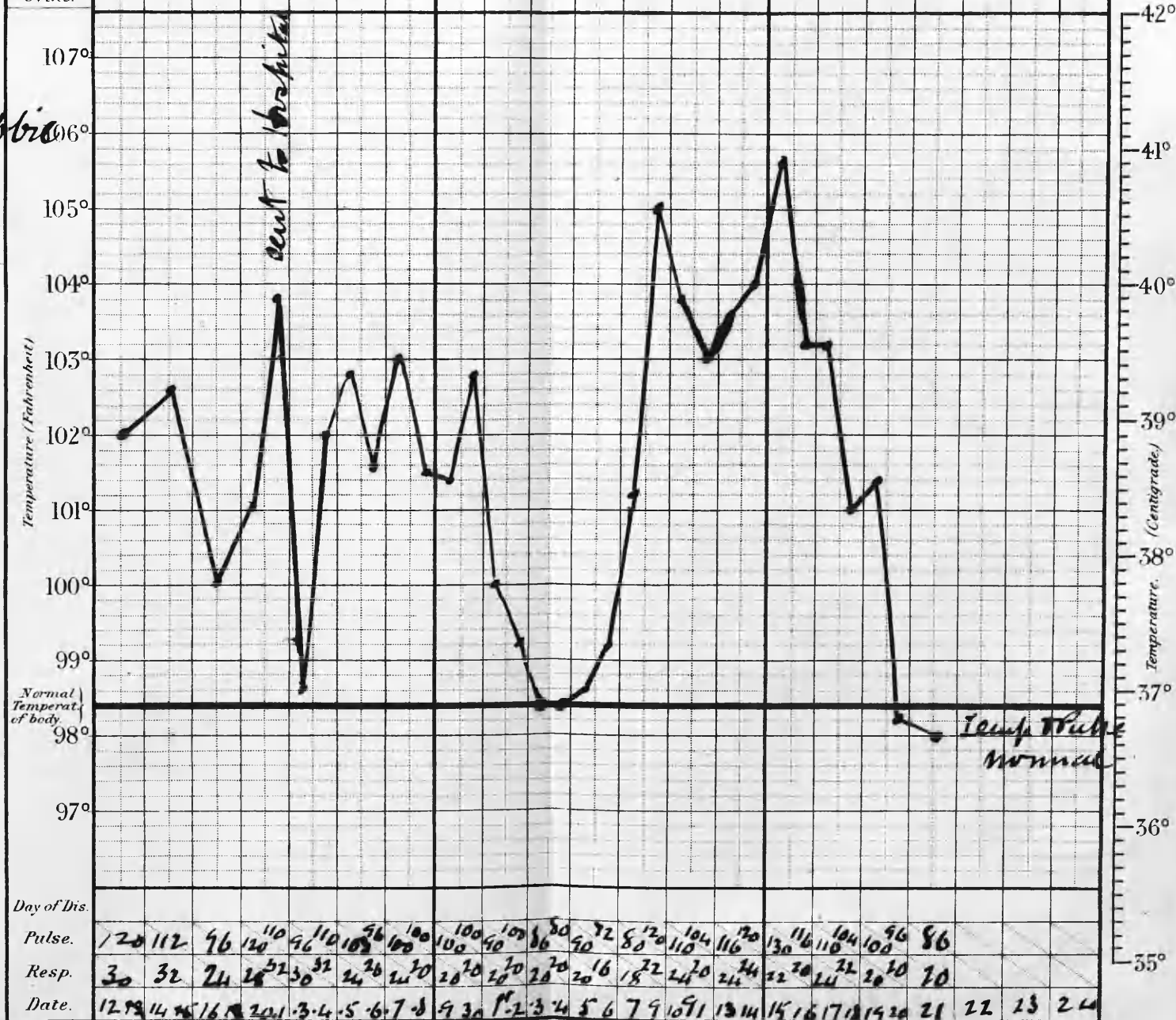
[illegible]

*Bowels.*  
*Urine.*

Age 14 yrs

### Diet

Case Book N.º



Date of admission \_\_\_\_\_

### Results

Entered at Stationers Hall.

Printed and ~~by~~ by Widderspoon & Co. 7, Serle Street, Lincoln's Inn

Gould's Clinical Chart

## DISEASE.

*Notes of Case.*

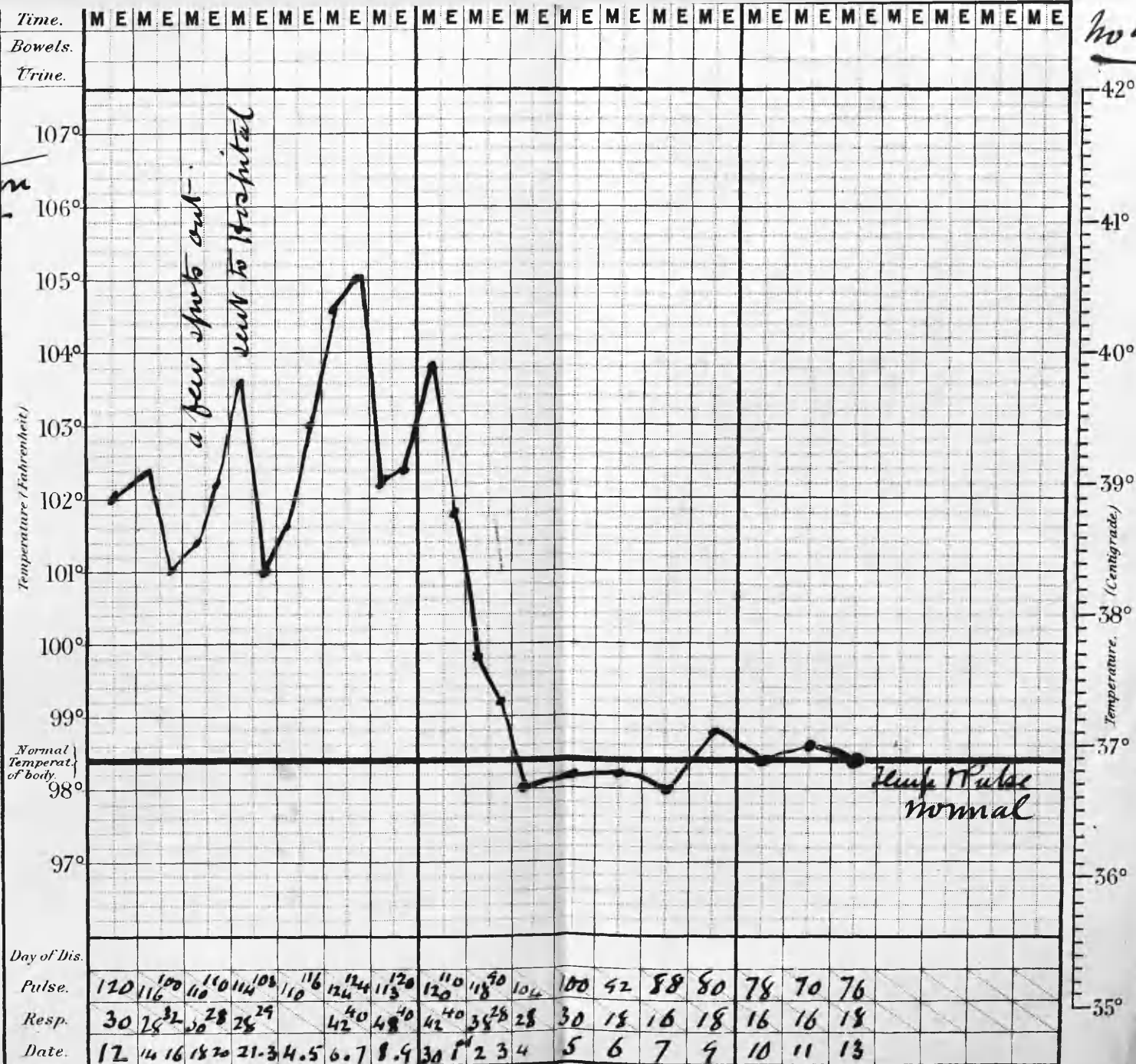
Notes on Case.

Name: Jeanie Watson  
V. Greenhill

Age 18 yrs

### Diet

Case Book N.º



Date of admission \_\_\_\_\_

## Result

*April at Stationers Hall*

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Gould's Clinical Chart

## DISEASE.

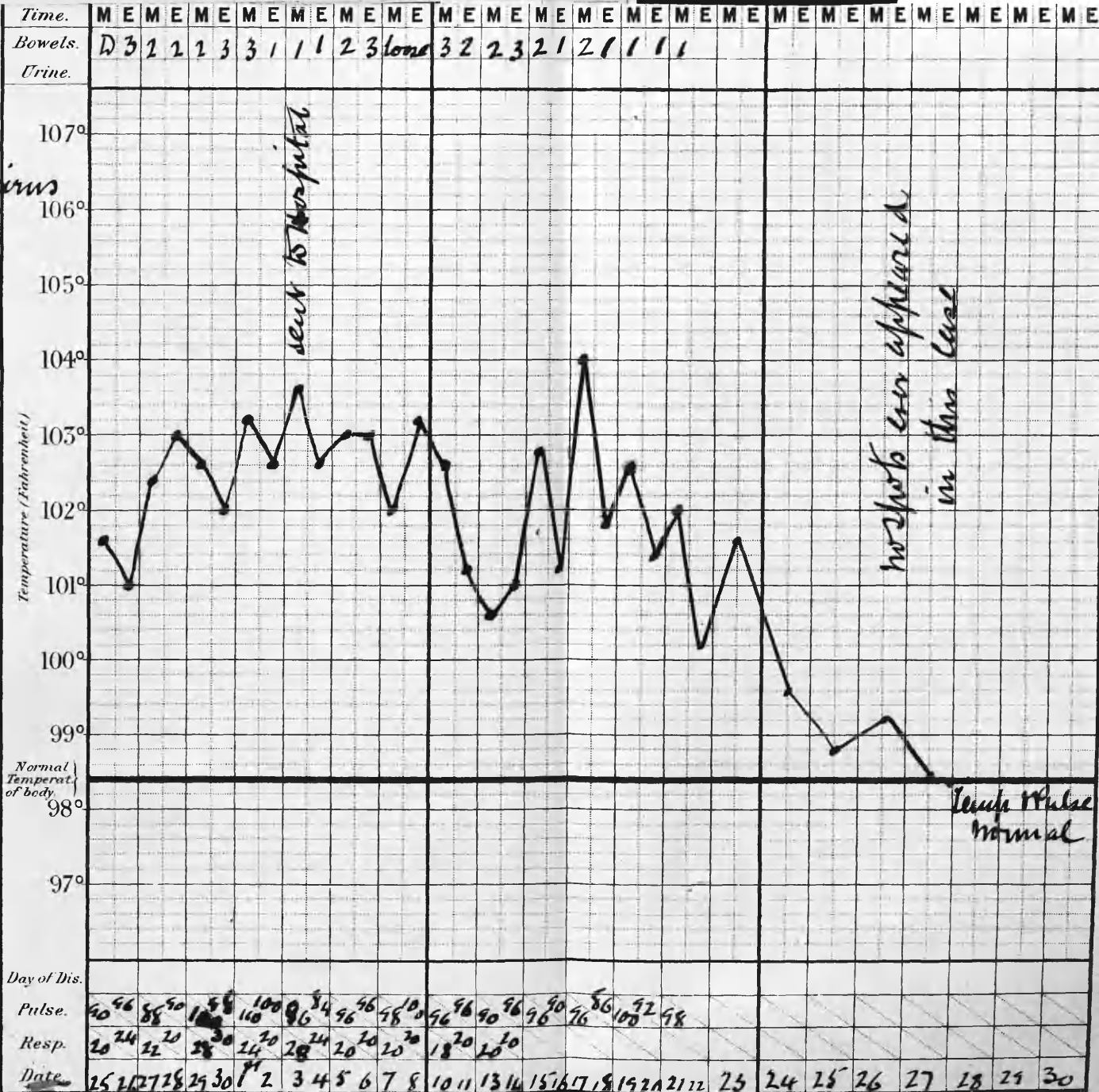
*Notes of Case.*

Name { alexander bairns  
Pithead boy 10

Age 14 yrs

## Diet

Case Book N.º



*Date of admission.*

## Result

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Gould's Clinical Chart



DISEASE.

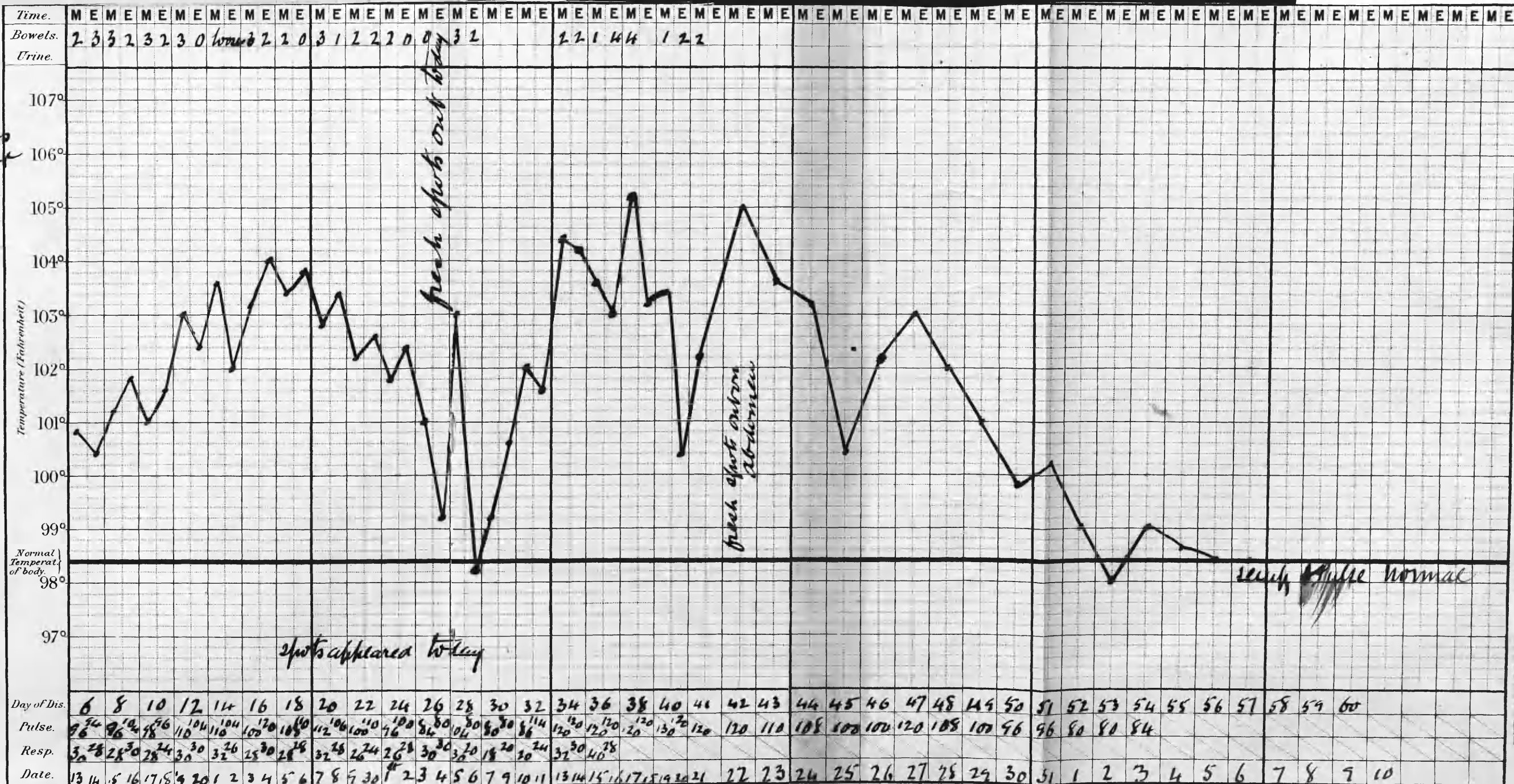
*Notes of Case.*

Name { Jeanie Cairns  
Shawstonfoot

Age 12 yrs

Diet

Case Book N.º



*Date of admission.*

### Result

at Stationers Hall.

Printed and Published by ~~W. H. Spoon & Co.~~ 7, ~~Leicester~~ <sup>York</sup> Street, Lincoln's Inn

*Gould's Clinical Chart. Stationers Hall*

Printed and Published by Widderspoon & Co, 7, Serle Street, Lincoln's Inn

Gould's Clinical Chart

DISEASE.

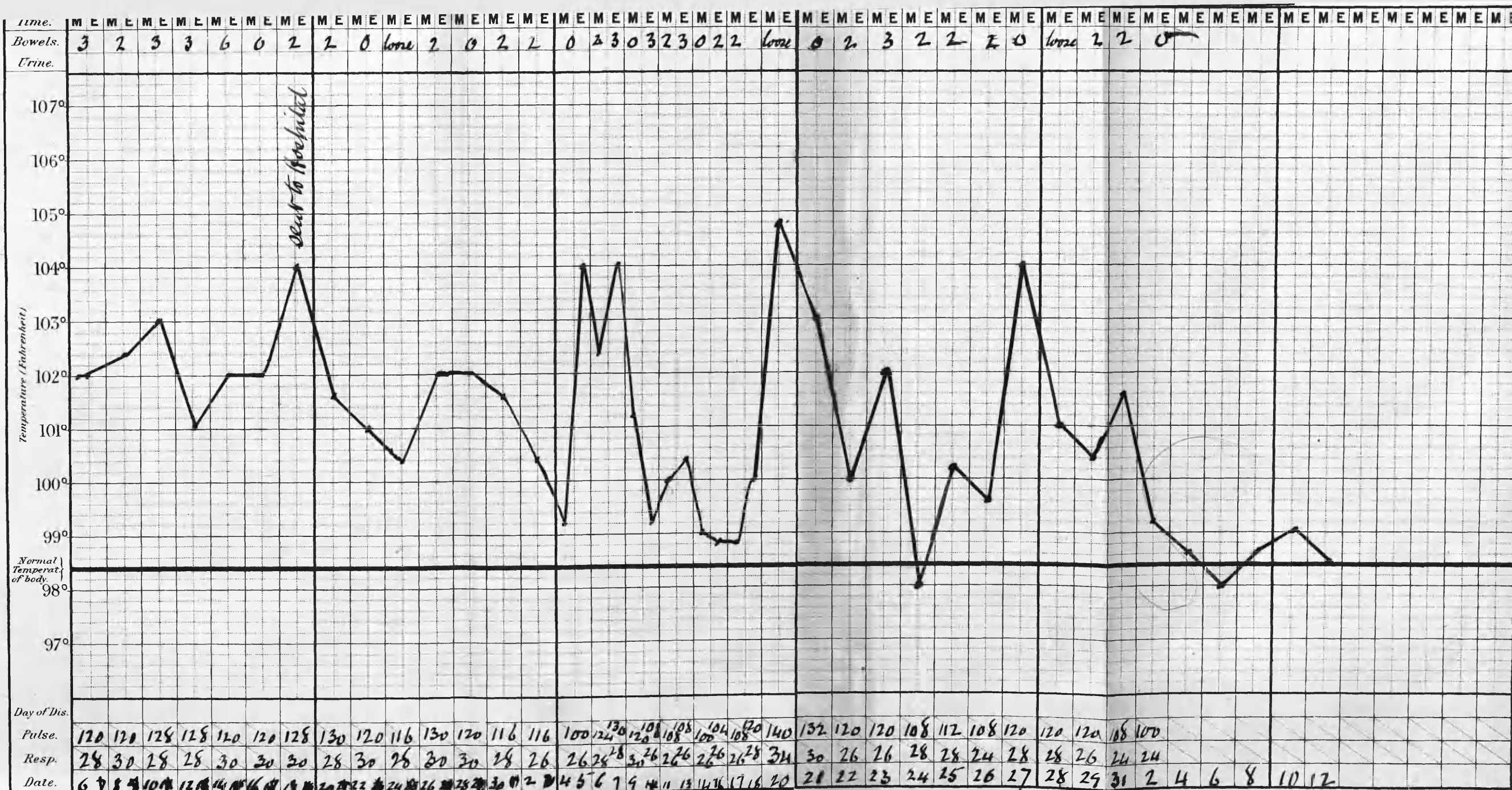
*Notes of Case.*

Name John Cairns  
Schoolboy

Age 10 yrs

Diet

*Case Book N.º*



*Date of admission.*

### Result

Enterell  
Afrid

Printed and Published by Widderspoon & Co. 25, Abchurch Lane, Street, Lincoln's Inn

*Gould's Clinical Chart Stationers Hall*

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